

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

REPUBLICAN PARTY OF VIRGINIA INC

ADDRESS (number and street) ▼

115 EAST GRACE STREET

☐ Check if different than previously reported. (ACC)

RICHMOND

VA

23219-1741 -

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00001305

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15 Quarterly Report (Q1)
- ☐ July 15 Quarterly Report (Q2)
- ☐ October 15 Quarterly Report (Q3)
- ☐ January 31 Year-End Report (YE)
- ☐ July 31 Mid-Year Report (Non-election Year Only) (MY)
- ☐ Termination Report (TER)

(b) Monthly Report Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11) (Non-Election Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☒ Sep 20 (M9) ☐ Dec 20 (M12) (Non-Election Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

(d) 30-Day POST-Election Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
08 01 2016

through

M M M / D D D / Y Y Y Y Y Y
08 31 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. John G Selph

Signature of Treasurer

Mr. John G Selph

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
09 16 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

REPUBLICAN PARTY OF VIRGINIA INC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
08 01 2016 To: M M / D D / Y Y Y Y Y Y
08 31 2016

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2016 | | 54283.62 |
| (b) Cash on Hand at Beginning of Reporting Period..... | 77903.55 | |
| (c) Total Receipts (from Line 19) | 186194.78 | 1189435.08 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | 264098.33 | 1243718.70 |
| 7. Total Disbursements (from Line 31) | 185436.28 | 1165056.65 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 78662.05 | 78662.05 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

REPUBLICAN PARTY OF VIRGINIA INC

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y
08 01 2016

To:

M M / D D / Y Y Y Y Y
08 31 2016
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

31650.98

225991.83

(ii) Unitemized

14493.06

114390.60

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

46144.04

340382.43

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

750.00

8785.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

46894.04

349167.43

12. Transfers From Affiliated/Other

Party Committees.....

118200.74

727640.74

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

70.46

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

2841.45

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

21100.00

109715.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

21100.00

109715.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))..... ▶

186194.78

1189435.08

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)..... ▶

165094.78

1079720.08

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | 3157.65 | 76021.13 |
| (ii) Non-Federal Share..... | 8119.66 | 112359.39 |
| (b) Other Federal Operating Expenditures | 8396.65 | 40502.70 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 19673.96 | 228883.22 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 2100.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 0.00 | 0.00 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 700.00 | 700.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 700.00 | 700.00 |
| 29. Other Disbursements | 500.00 | 1500.00 |
| 30. Federal Election Activity (2 U.S.C. §431(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share..... | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 164562.32 | 931873.43 |
| (c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b)).... | 164562.32 | 931873.43 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 185436.28 | 1165056.65 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 177316.62 | 1052697.26 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 46894.04 | 349167.43 |
| 34. Total Contribution Refunds (from Line 28(d)) | 700.00 | 700.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 46194.04 | 348467.43 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ► | 11554.30 | 116523.83 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 70.46 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) ► | 11554.30 | 116453.37 |

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Mr. Kenneth H. Adams

Mailing Address 712 Pelham Dr.

City

Waynesboro

State

VA

Zip Code

22980

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2016

☐ Primary
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

852.69

Date of Receipt

08 / 12 / 2016

Transaction ID : SA11AI.311798

Amount of Each Receipt this Period

152.69

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Steven Albertson

Mailing Address 4 Cavalcade Lane

City

Stafford

State

VA

Zip Code

22556

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Attorney

Receipt For: 2016

☐ Primary
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

921.60

Date of Receipt

08 / 12 / 2016

Transaction ID : SA11AI.311782

Amount of Each Receipt this Period

8.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mrs. Georgia K Alvis-Long

Mailing Address 140 New Hope & Crimora Rd.

City

Waynesboro

State

VA

Zip Code

22980

FEC ID number of contributing
federal political committee.

C

Name of Employer

Augusta Health Care

Occupation

Registered Nurse

Receipt For: 2016

☐ Primary
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

303.79

Date of Receipt

08 / 15 / 2016

Transaction ID : SA11AI.311830

Amount of Each Receipt this Period

303.79

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

465.43

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Lee S Baker

Mailing Address 1029 Richmond Ave

City State Zip Code
 Staunton VA 24401

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 15 / 2016

Transaction ID : SA11AI.311827

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ms. Juanita Balenger

Mailing Address 4302 Greenberry Ln

City State Zip Code
 Annandale VA 22003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Troutman Sanders LLP

Paralegal

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.311891

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. Richard P Bell

Mailing Address 2620 Eston Drive

City State Zip Code
 Staunton VA 24401

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 09 / 2016

Transaction ID : SA11AI.311704

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Morton C Blackwell

Mailing Address 3128 N. 17 St.

City

Arlington

State

VA

Zip Code

22201-2854

FEC ID number of contributing
federal political committee.

C

Name of Employer

Leadership Institute

Occupation

Executive

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2390.00

Date of Receipt

08 / 09 / 2016

Transaction ID : SA11AI.311719

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Saundra D Bondurant

Mailing Address 2455 Merriman Way

City

Moneta

State

VA

Zip Code

24121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Manufacturing

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.78

Date of Receipt

08 / 09 / 2016

Transaction ID : SA11AI.311716

Amount of Each Receipt this Period

273.78

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. Walter L Bunyea

Mailing Address 10803 Monticello Drive

City

Great Falls

State

VA

Zip Code

22066

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.311895

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1273.78

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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| | | | | | | | | |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Robert M. Carpenter Jr

Mailing Address 6333 Lakeway Dr.

| | | |
|----------------|-------|----------|
| City | State | Zip Code |
| Mechanicsville | VA | 23111 |

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 8 | | | | | 1 | 0 | | | 2 | 0 |

Transaction ID : SA11AI.311727

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. John D Cave

Mailing Address 6045 Ida Rd

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Stanley | VA | 22851 |

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

426.47

Date of Receipt

| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 8 | | | | | 1 | 2 | | | 2 | 0 |

Transaction ID : SA11AI.311800

Amount of Each Receipt this Period

426.47

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mrs. Gwendalyn F. Cody

Mailing Address 3703 King Arthur Rd

| | | |
|-----------|-------|------------|
| City | State | Zip Code |
| Annandale | VA | 22003-1320 |

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 8 | | | | | 1 | 0 | | | 3 | 0 |

Transaction ID : SA11AI.311650

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

701.47

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Mrs. Glenna D Coffing

Mailing Address 4320 Olley Ln

City State Zip Code
 Fairfax VA 22032

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 15 / 2016

Transaction ID : SA11AI.311811

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. James H Cohen

Mailing Address 1645 Pleasant Ridge Rd.

City State Zip Code
 Virginia Beach VA 23457

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Clark-Whitehall Enterprises

Owner

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 09 / 2016

Transaction ID : SA11AI.311718

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. Carlton R Crenshaw

Mailing Address 1336 Broken Is

City State Zip Code
 Palmyra VA 22963-4299

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

852.93

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 09 / 2016

Transaction ID : SA11AI.311715

Amount of Each Receipt this Period

852.93

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1477.93

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Mr. Dorian Daniels

Mailing Address 3510 Chamberlayne Ave. Apt. K

City State Zip Code
Richmond VA 23227

FEC ID number of contributing
federal political committee.

C

Name of Employer

Richmond Public Schools

Occupation

Management

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 30 / 2016

Transaction ID : SA11AI.311916

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. David H. Eggleston

Mailing Address 2415 Buckingham Ave.

City State Zip Code
Richmond VA 23228

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Consultant

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 30 / 2016

Transaction ID : SA11AI.311935

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Thomas A Feigum

Mailing Address 164A Mariners Point Lane

City State Zip Code
Hartfield VA 23071

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 23 / 2016

Transaction ID : SA11AI.311886

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

875.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
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(check only one)

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Ms. Rosalin A Gilbert

Mailing Address 860 Hillwell Rd

City State Zip Code
Chesapeake VA 23322

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ches. Public Schools

Occupation

Elementary Counselor

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 03 / 2016

Transaction ID : SA11AI.311618

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Richard B. Gilliam

Mailing Address PO Box 820

City State Zip Code
Keswick VA 22947

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cumberland Development Co. LLC

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 22 / 2016

Transaction ID : SA11AI.311549

Amount of Each Receipt this Period

10000.00

☒ Memo Item

Garrett Victory Fund contribution

Full Name (Last, First, Middle Initial)

C. Dr. Lorna J. Gladstone

Mailing Address 1161 Crest lane

City State Zip Code
McLean VA 22101

FEC ID number of contributing
federal political committee.

C

Name of Employer

retired

Occupation

retired

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 11 / 2016

Transaction ID : SA11AI.311775

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Mr. Peter D Guerrant III

Mailing Address 352 Clouds Mill Dr

City

Alexandria

State

VA

Zip Code

22304-3078

FEC ID number of contributing
federal political committee.

C

Name of Employer

National Guard Bureau

Occupation

Personnel Management

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

08 / 11 / 2016

Transaction ID : SA11AI.311736

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Robert Hammond

Mailing Address 707 upham place nw

City

vienna

State

VA

Zip Code

22180

FEC ID number of contributing
federal political committee.

C

Name of Employer

DoD

Occupation

supply

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

08 / 10 / 2016

Transaction ID : SA11AI.311733

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. Robert Hammond

Mailing Address 707 upham place nw

City

vienna

State

VA

Zip Code

22180

FEC ID number of contributing
federal political committee.

C

Name of Employer

DoD

Occupation

supply

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 16 / 2016

Transaction ID : SA11AI.311841

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Ms. Marcy Hernick

Mailing Address 2673 Blossom Trail East

City State Zip Code
 Blacksburg VA 24060

FEC ID number of contributing
federal political committee.

C

Name of Employer

Virginia Tech

Occupation

Professor

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 30 / 2016

Transaction ID : SA11AI.311924

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Robert C. Ike Jr.

Mailing Address 528 Hartswood Ter.

City State Zip Code
 Chesapeake VA 23322

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sentry Security Systems

Occupation

President

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

895.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 23 / 2016

Transaction ID : SA11AI.311894

Amount of Each Receipt this Period

160.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Richard D. Kern Jr

Mailing Address 1577 Moffett Drive

City State Zip Code
 Winchester VA 22601

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kern Motor Co.

Occupation

Auto Dealer

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 04 / 2016

Transaction ID : SA11AI.311681

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

910.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Mr. Dennis D Kirk

Mailing Address 6315 Anneliese Dr

City

Falls Church

State

VA

Zip Code

22044-1620

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Attorney

Receipt For: 2016

☐ Primary
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 02 / 2016

Transaction ID : SA11AI.311566

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. John B. Kishman

Mailing Address 12504 Fanleaf Ct

City

Fairfax

State

VA

Zip Code

22033

FEC ID number of contributing
federal political committee.

C

Name of Employer

IBM

Occupation

Program Manager

Receipt For: 2016

☐ Primary
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

450.00

Date of Receipt

08 / 02 / 2016

Transaction ID : SA11AI.311590

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Ms. Frances C Lane

Mailing Address 6805 Melrose Dr.

City

McLean

State

VA

Zip Code

22101-2927

FEC ID number of contributing
federal political committee.

C

Name of Employer

SAIC

Occupation

Defense Contractor

Receipt For: 2016

☐ Primary
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

320.00

Date of Receipt

08 / 16 / 2016

Transaction ID : SA11AI.311835

Amount of Each Receipt this Period

125.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

425.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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| | | | | | | | | |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Mr. G.E. (Mike) Lowry

Mailing Address 51 Shepherd Drive

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Lexington | VA | 24450 |

FEC ID number of contributing federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------------|
| M = M | / | D = D | / | Y = Y Y = Y Y = Y |
| 08 | / | 30 | / | 2016 |

Transaction ID : SA11AI.311923

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. James P Massie III

Mailing Address 9011 Norwick Rd

| | | |
|----------|-------|------------|
| City | State | Zip Code |
| Richmond | VA | 23229-7758 |

FEC ID number of contributing federal political committee.

C

Name of Employer

Self

Occupation

Investor

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------------|
| M = M | / | D = D | / | Y = Y Y = Y Y = Y |
| 08 | / | 16 | / | 2016 |

Transaction ID : SA11AI.311838

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mrs. Geraldine L McGrath

Mailing Address 3335 Belshire Ct.

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Roanoke | VA | 24014 |

FEC ID number of contributing federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------------|
| M = M | / | D = D | / | Y = Y Y = Y Y = Y |
| 08 | / | 23 | / | 2016 |

Transaction ID : SA11AI.311896

Amount of Each Receipt this Period

170.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1420.00

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Mr. James K. McKelvey

Mailing Address 400 Scruggs Rd. Ste 100

City State Zip Code
Moneta VA 24121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Real Estate Developer

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9780.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 11 / 2016

Transaction ID : SA11AI.311777

Amount of Each Receipt this Period

9000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Anthony J Mlinar

Mailing Address 5416 Gainsborough Drive

City State Zip Code
Fairfax VA 22032

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 23 / 2016

Transaction ID : SA11AI.311892

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. Chris Mohr

Mailing Address PO Box 3146

City State Zip Code
Martinsville VA 24112-0572

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Ameristaff Inc

Ceo

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

989.82

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 11 / 2016

Transaction ID : SA11AI.311781

Amount of Each Receipt this Period

989.82

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10114.82

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Mr. William Morris

Mailing Address 1360 Aarons Run Cir.

City State Zip Code
 Salem VA 24153-2669

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

08 / 03 / 2016

Transaction ID : SA11AI.311623

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. David C. Mowbray

Mailing Address 43262 Baltusrol Terr.

City State Zip Code
 Ashburn VA 20147

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Yorktel

Information Technology

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

08 / 10 / 2016

Transaction ID : SA11AI.311724

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Perry M. Moy

Mailing Address 9009 Linda Maria Court

City State Zip Code
 Fairfax VA 22031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 03 / 2016

Transaction ID : SA11AI.311648

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

400.00

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Charles N. Nielsen

Mailing Address 6101 Union Camp Dr.

City

State

Zip Code

Fairfax Station

VA

22039

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For: 2016

☐ Primary
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

08 / 11 / 2016

Transaction ID : SA11AI.311751

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Charles Obaugh

Mailing Address PO Box 2648

City

State

Zip Code

Staunton

VA

24401

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self Employed

Auto Dealer

Receipt For: 2016

☐ Primary
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 15 / 2016

Transaction ID : SA11AI.311832

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. Eric Obaugh

Mailing Address PO Box 2648

City

State

Zip Code

Staunton

VA

24402

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self Employed

Auto Dealer

Receipt For: 2016

☐ Primary
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 15 / 2016

Transaction ID : SA11AI.311829

Amount of Each Receipt this Period

500.00

☐ Memo Item

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TOTAL This Period (last page this line number only)..... ►

1075.00

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Mr. Tofie Owen

Mailing Address 8608 Woodland Heights Ct

City State Zip Code
Alexandria VA 22309-2248

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Saic

Consultant

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 04 / 2016

Transaction ID : SA11AI.311688

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ms. Sherry L Reynolds

Mailing Address 6217 Mori St.

City State Zip Code
McLean VA 22101-3150

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2016

Transaction ID : SA11AI.311944

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. James Rhine

Mailing Address PO Box 388

City State Zip Code
Timberville VA 22853-0388

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 24 / 2016

Transaction ID : SA11AI.311905

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1275.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Gene A. Rose

Mailing Address 5902 Bighorn Dr.

City State Zip Code
 Roanoke VA 24018

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1065.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 30 / 2016

Transaction ID : SA11AI.311915

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ms Nancy S. Russell

Mailing Address 14634 Stone Trace Dr.

City State Zip Code
 Montpelier VA 23192

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Morgan Stanley

Financial Advisor

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1120.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 16 / 2016

Transaction ID : SA11AI.311839

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Michael H. Schoelwer

Mailing Address 97 Pembroke Ln.

City State Zip Code
 Whitestone VA 22578

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

W.R. Harvey Co. LLC

Consultant

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 30 / 2016

Transaction ID : SA11AI.311921

Amount of Each Receipt this Period

170.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

795.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Eva F Scott

Mailing Address 15830 Goodes Bridge Rd

City State Zip Code
Amelia VA 23002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 23 / 2016

Transaction ID : SA11AI.311881

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. J. Randolph Smith Jr

Mailing Address 817 Mulberry Rd

City State Zip Code
Martinsville VA 24112

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Henry County

Attorney

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 03 / 2016

Transaction ID : SA11AI.311653

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Korey R Snead

Mailing Address 3175 Green Level Road

City State Zip Code
Scottsburg VA 24589

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

K. R. Snead Trucking, Inc.

Executive

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.22

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 08 / 2016

Transaction ID : SA11AI.311701

Amount of Each Receipt this Period

640.22

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

840.22

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Stella Diana Stooksbury

Mailing Address 2415 Ships Watch Ct.

City State Zip Code
 Virginia Beach VA 23451

FEC ID number of contributing
federal political committee.

C

Name of Employer

Atkinson Realty

Occupation

Realtor

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

535.00

Date of Receipt

08 / 30 / 2016

Transaction ID : SA11AI.311918

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Thomas H Taylor

Mailing Address 1864 Mariners Woods Dr

City State Zip Code
 Hartfield VA 23071

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.311893

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Whitey Taylor

Mailing Address 385 Speedway Ln

City State Zip Code
 Calloway VA 24067

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1890.00

Date of Receipt

08 / 12 / 2016

Transaction ID : SA11AI.311795

Amount of Each Receipt this Period

1890.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2640.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Mr. Albert S. Tucker Jr.

Mailing Address 61 Tuckaway Bridge

City State Zip Code
 Lexington VA 24450

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 17 / 2016

Transaction ID : SA11AI.311853

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Albert S. Tucker Jr.

Mailing Address 61 Tuckaway Bridge

City State Zip Code
 Lexington VA 24450

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 22 / 2016

Transaction ID : SA11AI.311879

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. Robert A. Watson

Mailing Address 6093 Spindle Tree Crt

City State Zip Code
 Woodbridge VA 22193

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Booz, Allen, Hamilton

Consultant

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

590.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 02 / 2016

Transaction ID : SA11AI.311564

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

450.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Mr. Robert A. Watson

Mailing Address 6093 Spindle Tree Crt

City State Zip Code
Woodbridge VA 22193

FEC ID number of contributing
federal political committee.

C

Name of Employer

Booz, Allen, Hamilton

Occupation

Consultant

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 30 / 2016

Transaction ID : SA11AI.311934

Amount of Each Receipt this Period

170.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Robert W Webster

Mailing Address 924 18th St S

City State Zip Code
Arlington VA 22202-2604

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 02 / 2016

Transaction ID : SA11AI.311594

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. John Whitlock

Mailing Address 8720 River Rd.

City State Zip Code
Richmond VA 23229

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Whitlock Group

Occupation

Chairman

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 04 / 2016

Transaction ID : SA11AI.311660

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1370.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Mr. John H Whitney

Mailing Address 10607 Beach Mill Rd

City State Zip Code
 Great Falls VA 22066

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 08 / 2016

Transaction ID : SA11AI.311700

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. S. Vance Wilkins Jr

Mailing Address P.O. Box 469

City State Zip Code
 Amherst VA 24521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Consultant

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

652.33

Date of Receipt

08 / 15 / 2016

Transaction ID : SA11AI.311833

Amount of Each Receipt this Period

642.33

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. S. Vance Wilkins Jr

Mailing Address P.O. Box 469

City State Zip Code
 Amherst VA 24521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Consultant

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

902.33

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.311885

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1392.33

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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| | | | |
|---|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| <input type="checkbox"/> 17 | | | |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Mr. George W Williams

Mailing Address 1994 Browns Gap Turnpike

| | | |
|-----------------|-------|----------|
| City | State | Zip Code |
| Charlottesville | VA | 22901 |

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

| | | | | |
|-------|---|-------|---|---------------|
| M = M | / | D = D | / | Y = Y Y = Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SA11AI.311818

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mrs. Fay D Williamson

Mailing Address 11812 Owls Nest Ct

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Midlothian | VA | 23113 |

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Bayhill Development

Office Manager

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

| | | | | |
|-------|---|-------|---|---------------|
| M = M | / | D = D | / | Y = Y Y = Y Y |
| 08 | | 23 | | 2016 |

Transaction ID : SA11AI.311887

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. Murphy Tuomey Wilson

Mailing Address PO Box 32

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| Bacova | VA | 24412 |

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

A. Morton Thomas & Associates, Inc.

Principal/Vice President

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2350.00

Date of Receipt

| | | | | |
|-------|---|-------|---|---------------|
| M = M | / | D = D | / | Y = Y Y = Y Y |
| 08 | | 02 | | 2016 |

Transaction ID : SA11AI.311576

Amount of Each Receipt this Period

100.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

325.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Mr. Murphy Tuomey Wilson

Mailing Address PO Box 32

City State Zip Code
Bacova VA 24412

FEC ID number of contributing
federal political committee.

C

Name of Employer

A. Morton Thomas & Associates, Inc.

Occupation

Principal/Vice President

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2850.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y
08 11 2016

Transaction ID : SA11AI.311743

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ms. Katherine J Youell

Mailing Address 3910 Baldwin Rd.

City State Zip Code
Chester VA 23831-4703

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y
08 02 2016

Transaction ID : SA11AI.311579

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M = M / D = D / Y = Y - Y - Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

650.00

31650.98

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. CARLY FOR AMERICA

Mailing Address PO BOX 25674

City State Zip Code
 ALEXANDRIA VA 22313

FEC ID number of contributing
federal political committee.

C C00610568

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

08 / 26 / 2016

Transaction ID : SA11C.311550

Amount of Each Receipt this Period

5000.00

☒ Memo Item

Garrett Victory Fund contribution

Full Name (Last, First, Middle Initial)

B. Trump for President, Inc. c/o Red Curve Solutions

Mailing Address 138 Conant St
 2nd Floor

City State Zip Code
 Beverly MA 01915

FEC ID number of contributing
federal political committee.

C C00580100

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

08 / 24 / 2016

Transaction ID : SA11C.311544

Amount of Each Receipt this Period

750.00

☐ Memo Item

Contribution

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

08 / 24 / 2016

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

750.00

TOTAL This Period (last page this line number only)..... ►

750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. 6TH CONGRESSIONAL DISTRICT REPUBLICAN FEDERAL COMMITTEE

Mailing Address PO BOX 34

City State Zip Code
 LEXINGTON VA 24450

FEC ID number of contributing
federal political committee.

C C00005801

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3590.74

Date of Receipt

08 / 05 / 2016

Transaction ID : SA12.311545

Amount of Each Receipt this Period

3590.74

☐ Memo Item

Contribution

Full Name (Last, First, Middle Initial)

B. GARRETT VICTORY FUND

Mailing Address P.O. BOX 26141

City State Zip Code
 ALEXANDRIA VA 22213

FEC ID number of contributing
federal political committee.

C C00622589

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

08 / 22 / 2016

Transaction ID : SA12.311547

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Contribution

Full Name (Last, First, Middle Initial)

C. GARRETT VICTORY FUND

Mailing Address P.O. BOX 26141

City State Zip Code
 ALEXANDRIA VA 22213

FEC ID number of contributing
federal political committee.

C C00622589

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

08 / 26 / 2016

Transaction ID : SA12.311548

Amount of Each Receipt this Period

5000.00

☐ Memo Item

contribution

SUBTOTAL of Receipts This Page (optional)..... ►

18590.74

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. REPUBLICAN NATIONAL COMMITTEE

Mailing Address 310 FIRST STREET SE

City State Zip Code
 WASHINGTON DC 20003

FEC ID number of contributing
federal political committee.

C C00003418

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

695175.00

Date of Receipt

08 / 01 / 2016

Transaction ID : SA12.311552

Amount of Each Receipt this Period

98610.00

☐ Memo Item

Fund transfer

Full Name (Last, First, Middle Initial)

B. REPUBLICAN NATIONAL COMMITTEE

Mailing Address 310 FIRST STREET SE

City State Zip Code
 WASHINGTON DC 20003

FEC ID number of contributing
federal political committee.

C C00003418

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

696175.00

Date of Receipt

08 / 15 / 2016

Transaction ID : SA12.311553

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Fund transfer

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

99610.00

118200.74

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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(check only one)

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| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Anedot, Inc

Mailing Address P. O. Box 84314

| | | |
|-------------|-------|----------|
| City | State | Zip Code |
| Baton Rouge | LA | 70884 |

Purpose of Disbursement
Online donation processing fee

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 31 | | 2016 |

Transaction ID : SB21B.311556

Amount of Each Disbursement this Period

| |
|-------|
| 63.85 |
|-------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Direct Mail Systems, Inc.

Mailing Address 12450 Automobile Boulevard

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Clearwater | FL | 33762 |

Purpose of Disbursement
Direct mail fundraising for Party

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 30 | | 2016 |

Transaction ID : SB21B.311535

Amount of Each Disbursement this Period

| |
|---------|
| 5389.12 |
|---------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Eventbrite

Mailing Address 155 5th St

| | | |
|---------------|-------|----------|
| City | State | Zip Code |
| San Francisco | CA | 94103 |

Purpose of Disbursement
Online donation processing fee

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 31 | | 2016 |

Transaction ID : SB21B.311558

Amount of Each Disbursement this Period

| |
|--------|
| 402.67 |
|--------|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

| |
|---------|
| 5855.64 |
|---------|

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 33 OF 97

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. MDS Communications Corporation

Mailing Address 545 W. Juanita Ave

| | | |
|------|-------|----------|
| City | State | Zip Code |
| Mesa | AZ | 85210 |

Purpose of Disbursement
Telemarketing fundraising for Party

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | | 30 | | 2016 |

Transaction ID : SB21B.311536

Amount of Each Disbursement this Period

| |
|---------|
| 2538.07 |
|---------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Raise the Money, Inc

Mailing Address P. O. Box 26466

| | | |
|-------------|-------|----------|
| City | State | Zip Code |
| Little Rock | AR | 72221 |

Purpose of Disbursement
Online donation processing fee

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | | 31 | | 2016 |

Transaction ID : SB21B.311557

Amount of Each Disbursement this Period

| |
|------|
| 2.94 |
|------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

Purpose of Disbursement

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
|-------|---|-------|---|-------------|

Amount of Each Disbursement this Period

| |
|--|
| |
|--|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

| |
|---------|
| 2541.01 |
|---------|

| |
|---------|
| 8396.65 |
|---------|

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 34 OF 97

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input checked="" type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Blaine Dunn

Mailing Address 115 Bedford Dr.

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Winchester | VA | 22602 |

Purpose of Disbursement
Refund of prior contribution

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | | 23 | | 2016 |

Transaction ID : SB28A.311529

Amount of Each Disbursement this Period

| |
|--------|
| 700.00 |
|--------|

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

Purpose of Disbursement

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
|-------|---|-------|---|-------------|

Amount of Each Disbursement this Period

| |
|--|
| |
|--|

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

Purpose of Disbursement

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
|-------|---|-------|---|-------------|

Amount of Each Disbursement this Period

| |
|--|
| |
|--|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

| |
|--------|
| 700.00 |
|--------|

| |
|--------|
| 700.00 |
|--------|

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 35 OF 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Fairfax County Republican Committee

Mailing Address 4246 Chain Bridge Rd

| | | |
|-----------------|-------------|-------------------|
| City Fairfax | State VA | Zip Code 22030 |
|-----------------|-------------|-------------------|

Purpose of Disbursement
Contribution to Committee non-Federal account

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

Date of Disbursement

| |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 08 / 03 / 2016 |

Transaction ID : SB29.311372

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

Purpose of Disbursement

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

Date of Disbursement

| |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
|-------------------------|

Amount of Each Disbursement this Period

| |
|--|
| |
|--|

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

Purpose of Disbursement

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

Date of Disbursement

| |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
|-------------------------|

Amount of Each Disbursement this Period

| |
|--|
| |
|--|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

| |
|--------|
| 500.00 |
|--------|

| |
|--------|
| 500.00 |
|--------|

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 36 OF 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Matthew Aistrop

Mailing Address P. O. Box 713

| | | |
|---------------|-------|----------|
| City | State | Zip Code |
| Big Stone Gap | VA | 24219 |

Purpose of Disbursement
Provide direct voter contact services

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311390

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Matthew Aistrop

Mailing Address P. O. Box 713

| | | |
|---------------|-------|----------|
| City | State | Zip Code |
| Big Stone Gap | VA | 24219 |

Purpose of Disbursement
Provide direct voter contact services

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 29 | | 2016 |

Transaction ID : SB30B.311465

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Reeve E Ashcraft

Mailing Address 5497 Snow Creek Ct

| | | |
|---------------|-------|----------|
| City | State | Zip Code |
| Prince George | VA | 23875 |

Purpose of Disbursement
Provide direct voter contact services

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311383

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

| |
|---------|
| 1500.00 |
|---------|

| |
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| |
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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 37 OF 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Cathy S Bolden

Mailing Address 8324 Wetherden Dr

| | | |
|----------------|-------|----------|
| City | State | Zip Code |
| Mechanicsville | VA | 23113 |

Purpose of Disbursement
Salary

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311430

Amount of Each Disbursement this Period

| |
|---------|
| 1261.49 |
|---------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Cathy S Bolden

Mailing Address 8324 Wetherden Dr

| | | |
|----------------|-------|----------|
| City | State | Zip Code |
| Mechanicsville | VA | 23113 |

Purpose of Disbursement
Salary advance

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 26 | | 2016 |

Transaction ID : SB30B.311479

Amount of Each Disbursement this Period

| |
|-------|
| 45.00 |
|-------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Cathy S Bolden

Mailing Address 8324 Wetherden Dr

| | | |
|----------------|-------|----------|
| City | State | Zip Code |
| Mechanicsville | VA | 23113 |

Purpose of Disbursement
Salary

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 31 | | 2016 |

Transaction ID : SB30B.311514

Amount of Each Disbursement this Period

| |
|---------|
| 1226.47 |
|---------|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

| |
|---------|
| 2532.96 |
|---------|

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 38 OF 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Derrick A Bolen

Mailing Address 1527 7th St

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Roanoke | VA | 24013 |

Purpose of Disbursement
Salary

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311400

Amount of Each Disbursement this Period

| |
|---------|
| 1139.49 |
|---------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Derrick A Bolen

Mailing Address 1527 7th St

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Roanoke | VA | 24013 |

Purpose of Disbursement
Employee mileage, cell reimbursement

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311434

Amount of Each Disbursement this Period

| |
|--------|
| 683.60 |
|--------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Derrick A Bolen

Mailing Address 1527 7th St

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Roanoke | VA | 24013 |

Purpose of Disbursement
Salary

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 31 | | 2016 |

Transaction ID : SB30B.311489

Amount of Each Disbursement this Period

| |
|---------|
| 1139.49 |
|---------|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

| |
|---------|
| 2962.58 |
|---------|

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 39 OF 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Jeffrey A Boone

Mailing Address 128 Mallard Dr

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Cloverdale | VA | 24077 |

Purpose of Disbursement
Provide direct voter contact services

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | / | 29 | / | 2016 |

Transaction ID : SB30B.311466

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. David Bradley

Mailing Address 14504 Riverside Dr

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Ashland | VA | 23005 |

Purpose of Disbursement
Employee garnishment payment

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | / | 22 | / | 2016 |

Transaction ID : SB30B.311431

Amount of Each Disbursement this Period

| |
|---------|
| 4200.00 |
|---------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Kevin N Brown

Mailing Address 19284 Creek Field Cir

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Leesburg | VA | 20176 |

Purpose of Disbursement
Salary

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | / | 15 | / | 2016 |

Transaction ID : SB30B.311401

Amount of Each Disbursement this Period

| |
|--------|
| 766.50 |
|--------|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

| |
|---------|
| 5966.50 |
|---------|

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 40 OF 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Kevin N Brown

Mailing Address 19284 Creek Field Cir

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Leesburg | VA | 20176 |

Purpose of Disbursement
Employee health ins reimbursement

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 29 | | 2016 |

Transaction ID : SB30B.311478

Amount of Each Disbursement this Period

| |
|--------|
| 200.00 |
|--------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Kevin N Brown

Mailing Address 19284 Creek Field Cir

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Leesburg | VA | 20176 |

Purpose of Disbursement
Salary

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 31 | | 2016 |

Transaction ID : SB30B.311490

Amount of Each Disbursement this Period

| |
|--------|
| 766.50 |
|--------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Jackson A Brumfield

Mailing Address 17483 Level Dr

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Richmond | VA | 23047 |

Purpose of Disbursement
Salary

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311402

Amount of Each Disbursement this Period

| |
|--------|
| 973.38 |
|--------|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

| |
|---------|
| 1939.88 |
|---------|

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 41 OF 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Jackson A Brumfield

Mailing Address 17483 Level Dr

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Richmond | VA | 23047 |

Purpose of Disbursement
Employee mileage, cell, health ins reimburse

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | / | 29 | / | 2016 |

Transaction ID : SB30B.311518

Amount of Each Disbursement this Period

| |
|--------|
| 322.87 |
|--------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Jackson A Brumfield

Mailing Address 17483 Level Dr

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Richmond | VA | 23047 |

Purpose of Disbursement
Salary

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | / | 31 | / | 2016 |

Transaction ID : SB30B.311491

Amount of Each Disbursement this Period

| |
|--------|
| 973.37 |
|--------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Gabrielle Burnett

Mailing Address 2016 Queen Victoria Ct

| | | |
|----------------|-------|----------|
| City | State | Zip Code |
| Virginia Beach | VA | 23454 |

Purpose of Disbursement
Provide direct voter contact services

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | / | 15 | / | 2016 |

Transaction ID : SB30B.311384

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

| |
|---------|
| 1796.24 |
|---------|

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 42 OF 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Gabrielle Burnett

Mailing Address 2016 Queen Victoria Ct

| | | |
|----------------|-------|----------|
| City | State | Zip Code |
| Virginia Beach | VA | 23454 |

Purpose of Disbursement
Provide direct voter contact services

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 31 | | 2016 |

Transaction ID : SB30B.311484

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Tyler Church

Mailing Address 21951 SE Bohna Park Rd

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Damascus | OR | 97089 |

Purpose of Disbursement
Salary

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311403

Amount of Each Disbursement this Period

| |
|---------|
| 1666.40 |
|---------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Tyler Church

Mailing Address 21951 SE Bohna Park Rd

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Damascus | OR | 97089 |

Purpose of Disbursement
Employee mileage, cell reimbursement

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311435

Amount of Each Disbursement this Period

| |
|--------|
| 160.92 |
|--------|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

| |
|---------|
| 2327.32 |
|---------|

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 43 OF 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Tyler Church

Mailing Address 21951 SE Bohna Park Rd

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Damascus | OR | 97089 |

Purpose of Disbursement
Salary

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 31 | | 2016 |

Transaction ID : SB30B.311492

Amount of Each Disbursement this Period

| |
|---------|
| 1666.39 |
|---------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Katherine A CourainMailing Address 570 Church St
#1411

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Brentwood | TN | 37027 |

Purpose of Disbursement
Salary

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311404

Amount of Each Disbursement this Period

| |
|---------|
| 1628.95 |
|---------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Katherine A CourainMailing Address 570 Church St
#1411

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Brentwood | TN | 37027 |

Purpose of Disbursement
Employee cell phone & health ins reimburse

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 29 | | 2016 |

Transaction ID : SB30B.311480

Amount of Each Disbursement this Period

| |
|--------|
| 428.00 |
|--------|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

| |
|---------|
| 3723.34 |
|---------|

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 44 OF 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Katherine A CourainMailing Address 570 Church St
#1411City State Zip Code
Brentwood TN 37027Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | | 31 | | 2016 |

Transaction ID : SB30B.311488

Amount of Each Disbursement this Period

| |
|---------|
| 6544.71 |
|---------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Stephen W Darlow

Mailing Address 316 Riverside Dr

City State Zip Code
Hampton VA 23669Purpose of Disbursement
Provide direct voter contact services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311391

Amount of Each Disbursement this Period

| |
|--------|
| 250.00 |
|--------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Stephen W Darlow

Mailing Address 316 Riverside Dr

City State Zip Code
Hampton VA 23669Purpose of Disbursement
Provide direct voter contact services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | | 29 | | 2016 |

Transaction ID : SB30B.311468

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

| |
|---------|
| 7294.71 |
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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 45 OF 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Jake M Didinsky

Mailing Address 8304 Central Ave

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Alexandria | VA | 22309 |

Purpose of Disbursement
Salary

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311405

Amount of Each Disbursement this Period

| |
|--------|
| 973.37 |
|--------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Jake M Didinsky

Mailing Address 8304 Central Ave

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Alexandria | VA | 22309 |

Purpose of Disbursement
Employee mileage, cell reimbursement

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311436

Amount of Each Disbursement this Period

| |
|--------|
| 302.87 |
|--------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Jake M Didinsky

Mailing Address 8304 Central Ave

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Alexandria | VA | 22309 |

Purpose of Disbursement
Salary

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | | 31 | | 2016 |

Transaction ID : SB30B.311493

Amount of Each Disbursement this Period

| |
|--------|
| 973.38 |
|--------|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

| |
|---------|
| 2249.62 |
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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 46 OF 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Daniel J Dodds

Mailing Address 15376 Wetherburn Ct

| | | |
|-------------|-------|----------|
| City | State | Zip Code |
| Centreville | VA | 20120 |

Purpose of Disbursement
Salary

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |
| State: | District: |

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311406

Amount of Each Disbursement this Period

| |
|---------|
| 1360.12 |
|---------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Daniel J Dodds

Mailing Address 15376 Wetherburn Ct

| | | |
|-------------|-------|----------|
| City | State | Zip Code |
| Centreville | VA | 20120 |

Purpose of Disbursement
Salary

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |
| State: | District: |

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 31 | | 2016 |

Transaction ID : SB30B.311494

Amount of Each Disbursement this Period

| |
|---------|
| 1360.13 |
|---------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. John L Findlay

Mailing Address 4505 W. Grace St

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Richmond | VA | 23230 |

Purpose of Disbursement
Salary

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |
| State: | District: |

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311407

Amount of Each Disbursement this Period

| |
|---------|
| 2340.50 |
|---------|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

| |
|---------|
| 5060.75 |
|---------|

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| |
|--|

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 47 OF 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Mr. John L Findlay

Mailing Address 4505 W. Grace St

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Richmond | VA | 23230 |

Purpose of Disbursement
Employee cell phone & health ins reimburse

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | / | 29 | / | 2016 |

Transaction ID : SB30B.311481

Amount of Each Disbursement this Period

| |
|--------|
| 426.00 |
|--------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. John L Findlay

Mailing Address 4505 W. Grace St

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Richmond | VA | 23230 |

Purpose of Disbursement
Salary

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | / | 31 | / | 2016 |

Transaction ID : SB30B.311495

Amount of Each Disbursement this Period

| |
|---------|
| 2340.50 |
|---------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Jenna Frye

Mailing Address 5409 O'Bryant Ct

| | | |
|----------------|-------|----------|
| City | State | Zip Code |
| Fredericksburg | VA | 22407 |

Purpose of Disbursement
Provide direct voter contact services

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | / | 15 | / | 2016 |

Transaction ID : SB30B.311393

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

| |
|---------|
| 3266.50 |
|---------|

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| |
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 48 OF 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Jenna Frye

Mailing Address 5409 O'Bryant Ct

| | | |
|----------------|-------|----------|
| City | State | Zip Code |
| Fredericksburg | VA | 22407 |

Purpose of Disbursement
Provide direct voter contact services

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 29 | | 2016 |

Transaction ID : SB30B.311469

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Melissa E Fwu

Mailing Address 2106 Grand Brook Ct

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Richmond | TX | 77469 |

Purpose of Disbursement
Salary

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311408

Amount of Each Disbursement this Period

| |
|---------|
| 1718.37 |
|---------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Melissa E Fwu

Mailing Address 2106 Grand Brook Ct

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Richmond | TX | 77469 |

Purpose of Disbursement
Employee reimbursement - see memo items

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311451

Amount of Each Disbursement this Period

| |
|--------|
| 605.38 |
|--------|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

| |
|---------|
| 2823.75 |
|---------|

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| |
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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 49 OF 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Melissa E Fwu

Mailing Address 2106 Grand Brook Ct

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Richmond | TX | 77469 |

Purpose of Disbursement
Employee mileage, cell, health ins reimburse

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311451.0

Amount of Each Disbursement this Period

| |
|--------|
| 510.69 |
|--------|

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Melissa E Fwu

Mailing Address 2106 Grand Brook Ct

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Richmond | TX | 77469 |

Purpose of Disbursement
Salary

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 31 | | 2016 |

Transaction ID : SB30B.311496

Amount of Each Disbursement this Period

| |
|---------|
| 1718.35 |
|---------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Patrick M Gooley

Mailing Address 3209 Parkwood Ter

| | | |
|--------------|-------|----------|
| City | State | Zip Code |
| Falls Church | VA | 22042 |

Purpose of Disbursement
Salary

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311409

Amount of Each Disbursement this Period

| |
|---------|
| 1300.18 |
|---------|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

| |
|---------|
| 3018.53 |
|---------|

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| |
|--|

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 50 OF 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Patrick M Gooley

Mailing Address 3209 Parkwood Ter

| | | |
|--------------|-------|----------|
| City | State | Zip Code |
| Falls Church | VA | 22042 |

Purpose of Disbursement
Employee reimbursement - see memo items

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | / | 15 | / | 2016 |

Transaction ID : SB30B.311455

Amount of Each Disbursement this Period

| |
|--------|
| 571.70 |
|--------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Patrick M Gooley

Mailing Address 3209 Parkwood Ter

| | | |
|--------------|-------|----------|
| City | State | Zip Code |
| Falls Church | VA | 22042 |

Purpose of Disbursement
Employee mileage, cell, health ins reimburse

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | / | 15 | / | 2016 |

Transaction ID : SB30B.311455.0

Amount of Each Disbursement this Period

| |
|--------|
| 328.88 |
|--------|

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Office Depot

Mailing Address 9700 West Broad St

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Glen Allen | VA | 23060 |

Purpose of Disbursement
Office supplies

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | / | 15 | / | 2016 |

Transaction ID : SB30B.311455.1

Amount of Each Disbursement this Period

| |
|-------|
| 67.82 |
|-------|

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

| |
|--------|
| 571.70 |
|--------|

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| |
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 51 OF 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Patrick M Gooley

Mailing Address 3209 Parkwood Ter

| | | |
|--------------|-------|----------|
| City | State | Zip Code |
| Falls Church | VA | 22042 |

Purpose of Disbursement
Salary

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | | 31 | | 2016 |

Transaction ID : SB30B.311497

Amount of Each Disbursement this Period

| |
|---------|
| 1300.16 |
|---------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Heather D Guillot

Mailing Address 4640 Lee Ave

| | | |
|----------------|-------|----------|
| City | State | Zip Code |
| Virginia Beach | VA | 23455 |

Purpose of Disbursement
Salary

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311410

Amount of Each Disbursement this Period

| |
|---------|
| 1387.12 |
|---------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Heather D Guillot

Mailing Address 4640 Lee Ave

| | | |
|----------------|-------|----------|
| City | State | Zip Code |
| Virginia Beach | VA | 23455 |

Purpose of Disbursement
Employee mileage, cell, health ins reimburse

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | | 24 | | 2016 |

Transaction ID : SB30B.311517

Amount of Each Disbursement this Period

| |
|--------|
| 693.06 |
|--------|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

| |
|---------|
| 3380.34 |
|---------|

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 52 OF 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Heather D Guillot

Mailing Address 4640 Lee Ave

| | | |
|----------------|-------|----------|
| City | State | Zip Code |
| Virginia Beach | VA | 23455 |

Purpose of Disbursement
Salary

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 31 | | 2016 |

Transaction ID : SB30B.311498

Amount of Each Disbursement this Period

| |
|---------|
| 1387.13 |
|---------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Elliott Harding

Mailing Address 1354 Stone Creek Ln

| | | |
|-----------------|-------|----------|
| City | State | Zip Code |
| Charlottesville | VA | 22902 |

Purpose of Disbursement
Salary

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311411

Amount of Each Disbursement this Period

| |
|---------|
| 1272.17 |
|---------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Elliott Harding

Mailing Address 1354 Stone Creek Ln

| | | |
|-----------------|-------|----------|
| City | State | Zip Code |
| Charlottesville | VA | 22902 |

Purpose of Disbursement
Employee mileage, cell, health ins reimburse

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311437

Amount of Each Disbursement this Period

| |
|--------|
| 433.71 |
|--------|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

| |
|---------|
| 3093.01 |
|---------|

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 53 OF 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Elliott Harding

Mailing Address 1354 Stone Creek Ln

| | | |
|-----------------|-------|----------|
| City | State | Zip Code |
| Charlottesville | VA | 22902 |

Purpose of Disbursement
Salary

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 31 | | 2016 |

Transaction ID : SB30B.311499

Amount of Each Disbursement this Period

| |
|---------|
| 1272.17 |
|---------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Stephen D Harvey

Mailing Address 1412 Gentry Ln

| | | |
|-----------------|-------|----------|
| City | State | Zip Code |
| Charlottesville | VA | 22903 |

Purpose of Disbursement
Provide direct voter contact services

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311395

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Stephen D Harvey

Mailing Address 1412 Gentry Ln

| | | |
|-----------------|-------|----------|
| City | State | Zip Code |
| Charlottesville | VA | 22903 |

Purpose of Disbursement
Provide direct voter contact services

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 29 | | 2016 |

Transaction ID : SB30B.311470

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

| |
|---------|
| 2272.17 |
|---------|

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 54 OF 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Andrew T Hull

Mailing Address 690 Chipstead Ln

| | | |
|----------------|-------|----------|
| City | State | Zip Code |
| Virginia Beach | VA | 23464 |

Purpose of Disbursement
Salary

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | / | 15 | / | 2016 |

Transaction ID : SB30B.311412

Amount of Each Disbursement this Period

| |
|---------|
| 1001.37 |
|---------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Andrew T Hull

Mailing Address 690 Chipstead Ln

| | | |
|----------------|-------|----------|
| City | State | Zip Code |
| Virginia Beach | VA | 23464 |

Purpose of Disbursement
Employee mileage reimbursement

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | / | 15 | / | 2016 |

Transaction ID : SB30B.311438

Amount of Each Disbursement this Period

| |
|-------|
| 85.25 |
|-------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Andrew T Hull

Mailing Address 690 Chipstead Ln

| | | |
|----------------|-------|----------|
| City | State | Zip Code |
| Virginia Beach | VA | 23464 |

Purpose of Disbursement
Salary

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | / | 31 | / | 2016 |

Transaction ID : SB30B.311500

Amount of Each Disbursement this Period

| |
|---------|
| 1001.38 |
|---------|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

| |
|---------|
| 2088.00 |
|---------|

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 55 OF 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Robert D Hutchinson

Mailing Address 520 W. Franklin St

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Richmond | VA | 23220 |

Purpose of Disbursement
Provide direct voter contact services

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311396

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Robert D Hutchinson

Mailing Address 520 W. Franklin St

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Richmond | VA | 23220 |

Purpose of Disbursement
Provide direct voter contact services

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 29 | | 2016 |

Transaction ID : SB30B.311471

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Lauren A Keiser

Mailing Address 516 Patrick St

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Portsmouth | VA | 23707 |

Purpose of Disbursement
Provide direct voter contact services

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 29 | | 2016 |

Transaction ID : SB30B.311472

Amount of Each Disbursement this Period

| |
|--------|
| 250.00 |
|--------|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

| |
|---------|
| 1250.00 |
|---------|

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 56 OF 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Erin D Lee

Mailing Address 14115 Bay Vista Dr

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Woodbridge | VA | 22191 |

Purpose of Disbursement
Salary

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311413

Amount of Each Disbursement this Period

| |
|---------|
| 1080.37 |
|---------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Erin D Lee

Mailing Address 14115 Bay Vista Dr

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Woodbridge | VA | 22191 |

Purpose of Disbursement
Employee health ins reimbursement

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311439

Amount of Each Disbursement this Period

| |
|--------|
| 172.18 |
|--------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Erin D Lee

Mailing Address 14115 Bay Vista Dr

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Woodbridge | VA | 22191 |

Purpose of Disbursement
Salary

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 31 | | 2016 |

Transaction ID : SB30B.311501

Amount of Each Disbursement this Period

| |
|---------|
| 1080.38 |
|---------|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

| |
|---------|
| 2332.93 |
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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 57 OF 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Mr. Francis A. Loehr III

Mailing Address 9305 Edington Dr

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Richmond | VA | 23237 |

Purpose of Disbursement
Salary

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311414

Amount of Each Disbursement this Period

| |
|---------|
| 2291.50 |
|---------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mr. Francis A. Loehr III

Mailing Address 9305 Edington Dr

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Richmond | VA | 23237 |

Purpose of Disbursement
Employee cell phone reimbursement

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | | 29 | | 2016 |

Transaction ID : SB30B.311482

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mr. Francis A. Loehr III

Mailing Address 9305 Edington Dr

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Richmond | VA | 23237 |

Purpose of Disbursement
Salary

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | | 31 | | 2016 |

Transaction ID : SB30B.311502

Amount of Each Disbursement this Period

| |
|---------|
| 2291.50 |
|---------|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

| |
|---------|
| 4683.00 |
|---------|

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 58 OF 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Andrew P Loposser

Mailing Address 814 S. Oak St

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Arlington | VA | 22204 |

Purpose of Disbursement
Salary

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311415

Amount of Each Disbursement this Period

| |
|---------|
| 1523.76 |
|---------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Andrew P Loposser

Mailing Address 814 S. Oak St

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Arlington | VA | 22204 |

Purpose of Disbursement
Employee mileage, cell, health ins reimburse

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311440

Amount of Each Disbursement this Period

| |
|--------|
| 391.20 |
|--------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Andrew P Loposser

Mailing Address 814 S. Oak St

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Arlington | VA | 22204 |

Purpose of Disbursement
Salary

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 31 | | 2016 |

Transaction ID : SB30B.311503

Amount of Each Disbursement this Period

| |
|---------|
| 1523.77 |
|---------|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

| |
|---------|
| 3438.73 |
|---------|

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 59 OF 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Marshall Miller

Mailing Address 817 Eshelman Mill Rd

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Lancaster | PA | 17602 |

Purpose of Disbursement
Provide direct voter contact services

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311385

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Marshall Miller

Mailing Address 817 Eshelman Mill Rd

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Lancaster | PA | 17602 |

Purpose of Disbursement
Provide direct voter contact services

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 31 | | 2016 |

Transaction ID : SB30B.311485

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Ashli A Minor

Mailing Address 22697 Ashley Inn Ter

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Ashburn | VA | 20148 |

Purpose of Disbursement
Salary

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311416

Amount of Each Disbursement this Period

| |
|---------|
| 1178.76 |
|---------|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

| |
|---------|
| 2178.76 |
|---------|

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| |
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 60 OF 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Ashli A Minor

Mailing Address 22697 Ashley Inn Ter

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Ashburn | VA | 20148 |

Purpose of Disbursement
Employee mileage, cell, health ins reimburse

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311441

Amount of Each Disbursement this Period

| |
|--------|
| 657.89 |
|--------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ashli A Minor

Mailing Address 22697 Ashley Inn Ter

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Ashburn | VA | 20148 |

Purpose of Disbursement
Salary

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | | 31 | | 2016 |

Transaction ID : SB30B.311504

Amount of Each Disbursement this Period

| |
|---------|
| 1178.78 |
|---------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Anita Moody

Mailing Address 186 Davidson Dr

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Bluefield | VA | 24605 |

Purpose of Disbursement
Provide direct voter contact services

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311386

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

| |
|---------|
| 2336.67 |
|---------|

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| |
|--|

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 61 OF 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Paula L Nachman

Mailing Address 13201 Lowery Bluff Way

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Midlothian | VA | 23112 |

Purpose of Disbursement
Provide direct voter contact services

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311387

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Paula L Nachman

Mailing Address 13201 Lowery Bluff Way

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Midlothian | VA | 23112 |

Purpose of Disbursement
Provide direct voter contact services

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 31 | | 2016 |

Transaction ID : SB30B.311486

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. James O'Connell

Mailing Address 3960 Triad Ct

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Woodbridge | VA | 22192 |

Purpose of Disbursement
reimbursement - see memo item

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311461

Amount of Each Disbursement this Period

| |
|--------|
| 113.75 |
|--------|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

| |
|---------|
| 1113.75 |
|---------|

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 62 OF 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Buffalo Wild Wings

Mailing Address 1501 E. Cary St

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Richmond | VA | 23219 |

Purpose of Disbursement
Staff training meal

001

Candidate Name

Category/
Type

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311461.0

Amount of Each Disbursement this Period

| |
|--------|
| 113.75 |
|--------|

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Alex Piacenti

Mailing Address 91 28th St

| | | |
|--------------|-------|----------|
| City | State | Zip Code |
| Newport News | VA | 23607 |

Purpose of Disbursement
Salary

001

Candidate Name

Category/
Type

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311417

Amount of Each Disbursement this Period

| |
|---------|
| 1048.37 |
|---------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Alex Piacenti

Mailing Address 91 28th St

| | | |
|--------------|-------|----------|
| City | State | Zip Code |
| Newport News | VA | 23607 |

Purpose of Disbursement
Salary

001

Candidate Name

Category/
Type

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 31 | | 2016 |

Transaction ID : SB30B.311505

Amount of Each Disbursement this Period

| |
|---------|
| 1048.38 |
|---------|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

| |
|---------|
| 2096.75 |
|---------|

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| |
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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 63 OF 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Logan Plaster

Mailing Address P. O. Box 614

| | | |
|-------|-------|----------|
| City | State | Zip Code |
| Raven | VA | 24639 |

Purpose of Disbursement
Provide direct voter contact services

001

Candidate Name

Category/
Type

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311397

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Logan Plaster

Mailing Address P. O. Box 614

| | | |
|-------|-------|----------|
| City | State | Zip Code |
| Raven | VA | 24639 |

Purpose of Disbursement
Provide direct voter contact services

001

Candidate Name

Category/
Type

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 29 | | 2016 |

Transaction ID : SB30B.311474

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Scott R Presler

Mailing Address 2000 Whipple Ct

| | | |
|----------------|-------|----------|
| City | State | Zip Code |
| Virginia Beach | VA | 23464 |

Purpose of Disbursement
Salary

001

Candidate Name

Category/
Type

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311418

Amount of Each Disbursement this Period

| |
|---------|
| 1272.17 |
|---------|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

| |
|---------|
| 2272.17 |
|---------|

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 64 OF 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Scott R Presler

Mailing Address 2000 Whipple Ct

| | | |
|----------------|-------|----------|
| City | State | Zip Code |
| Virginia Beach | VA | 23464 |

Purpose of Disbursement
Salary

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |
| State: | District: |

| |
|---|
| Disbursement For: |
| <input type="checkbox"/> Primary <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | / | 31 | / | 2016 |

Transaction ID : SB30B.311506

Amount of Each Disbursement this Period

| |
|---------|
| 1272.16 |
|---------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Printing Express

Mailing Address P. O. Box 1975

| | | |
|--------------|-------|----------|
| City | State | Zip Code |
| Harrisonburg | VA | 22801 |

Purpose of Disbursement
Exempt Party Activity-Campaign materials

Candidate Name

Trump for President, Inc. c/o Red Curve Solutions

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input checked="" type="checkbox"/> President |
| State: | District: |

| |
|--|
| Disbursement For: 2016 |
| <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | / | 08 | / | 2016 |

Transaction ID : SB30B.311370

Amount of Each Disbursement this Period

| |
|---------|
| 4230.96 |
|---------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Printing Express

Mailing Address P. O. Box 1975

| | | |
|--------------|-------|----------|
| City | State | Zip Code |
| Harrisonburg | VA | 22801 |

Purpose of Disbursement
Exempt Party Activity-Campaign materials

Candidate Name

Trump for President, Inc. c/o Red Curve Solutions

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input checked="" type="checkbox"/> President |
| State: | District: |

| |
|--|
| Disbursement For: 2016 |
| <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | / | 09 | / | 2016 |

Transaction ID : SB30B.311373

Amount of Each Disbursement this Period

| |
|---------|
| 2817.83 |
|---------|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

8320.95

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 65 OF 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Printing Express

Mailing Address P. O. Box 1975

| | | |
|--------------|-------|----------|
| City | State | Zip Code |
| Harrisonburg | VA | 22801 |

Purpose of Disbursement
Exempt Party Activity-Campaign materials

006

Candidate Name

Trump for President, Inc. c/o Red Curve SolutionsCategory/
TypeOffice Sought: ☐ House
☐ Senate
☒ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | / | 10 | / | 2016 |

Transaction ID : SB30B.311374

Amount of Each Disbursement this Period

3437.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Printing Express

Mailing Address P. O. Box 1975

| | | |
|--------------|-------|----------|
| City | State | Zip Code |
| Harrisonburg | VA | 22801 |

Purpose of Disbursement
Exempt Party Activity-Campaign materials

006

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | / | 11 | / | 2016 |

Transaction ID : SB30B.311377

Amount of Each Disbursement this Period

10372.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Printing Express

Mailing Address P. O. Box 1975

| | | |
|--------------|-------|----------|
| City | State | Zip Code |
| Harrisonburg | VA | 22801 |

Purpose of Disbursement
Exempt Party Activity-Campaign materials

006

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | / | 12 | / | 2016 |

Transaction ID : SB30B.311379

Amount of Each Disbursement this Period

2390.31

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

16199.36

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 66 OF 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Printing Express

Mailing Address P. O. Box 1975

| | | |
|--------------|-------|----------|
| City | State | Zip Code |
| Harrisonburg | VA | 22801 |

Purpose of Disbursement
Exempt Party Activity-Campaign materials

006

Candidate Name

Trump for President, Inc. c/o Red Curve SolutionsCategory/
TypeOffice Sought: ☐ House
☐ Senate
☒ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | / | 15 | / | 2016 |

Transaction ID : SB30B.311426

Amount of Each Disbursement this Period

5578.81

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Printing Express

Mailing Address P. O. Box 1975

| | | |
|--------------|-------|----------|
| City | State | Zip Code |
| Harrisonburg | VA | 22801 |

Purpose of Disbursement
Exempt Party Activity-Campaign materials

006

Candidate Name

Trump for President, Inc. c/o Red Curve SolutionsCategory/
TypeOffice Sought: ☐ House
☐ Senate
☒ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | / | 22 | / | 2016 |

Transaction ID : SB30B.311429

Amount of Each Disbursement this Period

439.60

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Printing Express

Mailing Address P. O. Box 1975

| | | |
|--------------|-------|----------|
| City | State | Zip Code |
| Harrisonburg | VA | 22801 |

Purpose of Disbursement
Exempt Party Activity-Campaign materials

006

Candidate Name

Trump for President, Inc. c/o Red Curve SolutionsCategory/
TypeOffice Sought: ☐ House
☐ Senate
☒ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | / | 24 | / | 2016 |

Transaction ID : SB30B.311515

Amount of Each Disbursement this Period

167.43

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

| |
|---------|
| 6185.84 |
|---------|

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 67 OF 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Quickbooks Payroll Service

Mailing Address P. O. Box 6170

| | | |
|----------------|-------|----------|
| City | State | Zip Code |
| Fredericksburg | VA | 22403 |

Purpose of Disbursement
Employee withholding & payroll taxes

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | / | 12 | / | 2016 |

Transaction ID : SB30B.311378

Amount of Each Disbursement this Period

| |
|----------|
| 14170.60 |
|----------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Quickbooks Payroll Service

Mailing Address P. O. Box 6170

| | | |
|----------------|-------|----------|
| City | State | Zip Code |
| Fredericksburg | VA | 22403 |

Purpose of Disbursement
Employee withholding and payroll taxes

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | / | 30 | / | 2016 |

Transaction ID : SB30B.311483

Amount of Each Disbursement this Period

| |
|----------|
| 16188.85 |
|----------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Lynette B Rash

Mailing Address 117 Richardson Dr

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Tazewell | VA | 24651 |

Purpose of Disbursement
Salary

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | / | 15 | / | 2016 |

Transaction ID : SB30B.311419

Amount of Each Disbursement this Period

| |
|--------|
| 946.37 |
|--------|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

| |
|----------|
| 31305.82 |
|----------|

| |
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| |
|--|

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 68 OF 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Lynette B Rash

Mailing Address 117 Richardson Dr

| | | |
|------------------|-------------|-------------------|
| City Tazewell | State VA | Zip Code 24651 |
|------------------|-------------|-------------------|

Purpose of Disbursement
Salary

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 31 | | 2016 |

Transaction ID : SB30B.311507

Amount of Each Disbursement this Period

| |
|--------|
| 946.38 |
|--------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Kristin A Retter

Mailing Address 1426 Bradley Dr

| | | |
|----------------------|-------------|-------------------|
| City Harrisonburg | State VA | Zip Code 22801 |
|----------------------|-------------|-------------------|

Purpose of Disbursement
Salary

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311420

Amount of Each Disbursement this Period

| |
|---------|
| 1327.18 |
|---------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Kristin A Retter

Mailing Address 1426 Bradley Dr

| | | |
|----------------------|-------------|-------------------|
| City Harrisonburg | State VA | Zip Code 22801 |
|----------------------|-------------|-------------------|

Purpose of Disbursement
Employee mileage, cell, health ins reimburse

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311442

Amount of Each Disbursement this Period

| |
|--------|
| 824.61 |
|--------|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

| |
|---------|
| 3098.17 |
|---------|

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 69 OF 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Kristin A Retter

Mailing Address 1426 Bradley Dr

| | | |
|--------------|-------|----------|
| City | State | Zip Code |
| Harrisonburg | VA | 22801 |

Purpose of Disbursement
Salary

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | | 31 | | 2016 |

Transaction ID : SB30B.311508

Amount of Each Disbursement this Period

| |
|---------|
| 1327.17 |
|---------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Joshua R Rosene

Mailing Address 7869 Meadowgate Dr

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Manassas | VA | 20112 |

Purpose of Disbursement
Provide direct voter contact services

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311398

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Dennis Rotherham

Mailing Address 100 Farmington Ter

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Sterling | VA | 20164 |

Purpose of Disbursement
Provide direct voter contact services

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311389

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

| |
|---------|
| 2327.17 |
|---------|

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 70 OF 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Dennis Rotherham

Mailing Address 100 Farmington Ter

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Sterling | VA | 20164 |

Purpose of Disbursement
Provide direct voter contact services

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 31 | | 2016 |

Transaction ID : SB30B.311487

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bayleigh B Sandoval

Mailing Address 1188 Lord Dunmore Dr

| | | |
|----------------|-------|----------|
| City | State | Zip Code |
| Virginia Beach | VA | 23464 |

Purpose of Disbursement
Salary

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311421

Amount of Each Disbursement this Period

| |
|---------|
| 1005.37 |
|---------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Bayleigh B Sandoval

Mailing Address 1188 Lord Dunmore Dr

| | | |
|----------------|-------|----------|
| City | State | Zip Code |
| Virginia Beach | VA | 23464 |

Purpose of Disbursement
Employee meal expense

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311463

Amount of Each Disbursement this Period

| |
|-------|
| 60.14 |
|-------|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

| |
|---------|
| 1565.51 |
|---------|

| |
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| |
|--|

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 71 OF 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Bayleigh B Sandoval

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | | 31 | | 2016 |

Mailing Address 1188 Lord Dunmore Dr

| | | |
|----------------|-------|----------|
| City | State | Zip Code |
| Virginia Beach | VA | 23464 |

Purpose of Disbursement
Salary

001

Candidate Name

Category/
Type

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

State: District:

Transaction ID : SB30B.311509

Amount of Each Disbursement this Period

| |
|---------|
| 1005.38 |
|---------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Michael R Shaeffer

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Mailing Address 1552 Poplar Grove Dr

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| Reston | VA | 20194 |

Purpose of Disbursement
Salary

001

Candidate Name

Category/
Type

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

State: District:

Transaction ID : SB30B.311422

Amount of Each Disbursement this Period

| |
|---------|
| 1272.17 |
|---------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Michael R Shaeffer

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Mailing Address 1552 Poplar Grove Dr

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| Reston | VA | 20194 |

Purpose of Disbursement
Employee cell phone, health ins reimburse

001

Candidate Name

Category/
Type

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

State: District:

Transaction ID : SB30B.311443

Amount of Each Disbursement this Period

| |
|--------|
| 254.34 |
|--------|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2531.89

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 72 OF 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Michael R Shaeffer

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 31 | | 2016 |

Mailing Address 1552 Poplar Grove Dr

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| Reston | VA | 20194 |

Purpose of Disbursement
Salary

001

Candidate Name

Category/
Type

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

State: District:

Transaction ID : SB30B.311510

Amount of Each Disbursement this Period

| |
|---------|
| 1272.17 |
|---------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ethan S Shim

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Mailing Address 14008 Marleigh Ln

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Clifton | VA | 20124 |

Purpose of Disbursement
Salary

001

Candidate Name

Category/
Type

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

State: District:

Transaction ID : SB30B.311423

Amount of Each Disbursement this Period

| |
|--------|
| 973.37 |
|--------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Ethan S Shim

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Mailing Address 14008 Marleigh Ln

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Clifton | VA | 20124 |

Purpose of Disbursement
Employee mileage reimbursement

001

Candidate Name

Category/
Type

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| | | |
|-------------------|--|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ | |

State: District:

Transaction ID : SB30B.311444

Amount of Each Disbursement this Period

| |
|--------|
| 233.68 |
|--------|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

| |
|---------|
| 2479.22 |
|---------|

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 73 OF 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Ethan S Shim

Mailing Address 14008 Marleigh Ln

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Clifton | VA | 20124 |

Purpose of Disbursement
Salary

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 31 | | 2016 |

Transaction ID : SB30B.311511

Amount of Each Disbursement this Period

| |
|--------|
| 973.38 |
|--------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ross W Snare IV

Mailing Address 6165 Pohick Station Dr

| | | |
|-----------------|-------|----------|
| City | State | Zip Code |
| Fairfax Station | VA | 22039 |

Purpose of Disbursement
Employee mileage, cell, health ins reimburse

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 23 | | 2016 |

Transaction ID : SB30B.311516

Amount of Each Disbursement this Period

| |
|--------|
| 188.17 |
|--------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. State Fair of Virginia

Mailing Address PO Box 130

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Doswell | VA | 23047 |

Purpose of Disbursement
Booth rental at State Fair

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 11 | | 2016 |

Transaction ID : SB30B.311376

Amount of Each Disbursement this Period

| |
|--------|
| 675.00 |
|--------|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

| |
|---------|
| 1836.55 |
|---------|

| |
|--|
| |
|--|

| | | | | | | | | | | | |
|--|-----|--|-----|--|-----|--|-----|--|----|----------|-----|
| | 21b | | 22 | | 23 | | 24 | | 25 | | 26 |
| | 27 | | 28a | | 28b | | 28c | | 29 | x | 30b |

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF VIRGINIA INC

A. State Fair of Virginia

Mailing Address PO Box 130

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Doswell | VA | 23047 |

| | |
|-------------------------|----------------------------|
| Purpose of Disbursement | Booth rental at State Fair |
|-------------------------|----------------------------|

Candidate Name

| | | |
|----------------|--------------------------|-----------|
| Office Sought: | <input type="checkbox"/> | House |
| | <input type="checkbox"/> | Senate |
| | <input type="checkbox"/> | President |

Disbursement For:

| | | | |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ | | |

Date of Disbursement

Three digital displays are shown, each with a set of letters above the digits. The first display shows '08' with 'M' above the '0' and 'M' above the '8'. The second display shows '16' with 'D' above the '1' and 'D' above the '6'. The third display shows '2016' with 'Y' above the '2', 'Y' above the '0', 'Y' above the '1', and 'Y' above the '6'.

Transaction ID : SB30B.311428

Amount of Each Disbursement this Period

790.00

 Memo Item

Full Name (Last, First, Middle Initial)

B. Jeffrey B Stidham

Mailing Address 801 North Blvd

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Richmond | VA | 23230 |

| Purpose of Disbursement | Salary |
|-------------------------|--------|
| | |

Candidate Name

| | | |
|----------------|--------------------------|-----------|
| Office Sought: | <input type="checkbox"/> | House |
| | <input type="checkbox"/> | Senate |
| | <input type="checkbox"/> | President |

Disbursement For:

| | | | |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ | | |

Date of Disbursement

08 / 15 / 2016

Transaction ID : SB30B.311424

Amount of Each Disbursement this Period

1500.95

 Memo Item

Full Name (Last, First, Middle Initial)

C. Jeffrey B Stidham

Mailing Address 801 North Blvd

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Richmond | VA | 23230 |

| |
|---|
| Purpose of Disbursement |
| Employee mileage & health ins reimbursement |

Candidate Name

| | | |
|----------------|--------------------------|-----------|
| Office Sought: | <input type="checkbox"/> | House |
| | <input type="checkbox"/> | Senate |
| | <input type="checkbox"/> | President |

Disbursement For:

| | | | |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ | | |

Date of Disbursement



Transaction ID : SB30B.311445

Amount of Each Disbursement this Period

369.93

 Memo Item

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

2660.88

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 75 OF 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Jeffrey B Stidham

Mailing Address 801 North Blvd

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Richmond | VA | 23230 |

Purpose of Disbursement
Salary

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 31 | | 2016 |

Transaction ID : SB30B.311512

Amount of Each Disbursement this Period

| |
|---------|
| 1500.95 |
|---------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Lynn M Tallant

Mailing Address 1469 S. Highview Ln

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Alexandria | VA | 22311 |

Purpose of Disbursement
Provide direct voter contact services

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Transaction ID : SB30B.311399

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Lynn M Tallant

Mailing Address 1469 S. Highview Ln

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Alexandria | VA | 22311 |

Purpose of Disbursement
Provide direct voter contact services

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

| | |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General |
| | <input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | | 29 | | 2016 |

Transaction ID : SB30B.311475

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

| |
|---------|
| 2500.95 |
|---------|

| |
|--|
| |
|--|

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 76 OF 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. Gary A Tysor

Mailing Address 4000 Appaloosa Ct

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Suffolk | VA | 23434 |

Purpose of Disbursement
Provide direct voter contact services

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | / | 29 | / | 2016 |

Transaction ID : SB30B.311476

Amount of Each Disbursement this Period

| |
|--------|
| 250.00 |
|--------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. John Vick

Mailing Address 7301 Lava Rock Cir

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Manassas | VA | 20111 |

Purpose of Disbursement
Salary

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | / | 15 | / | 2016 |

Transaction ID : SB30B.311425

Amount of Each Disbursement this Period

| |
|---------|
| 1330.18 |
|---------|

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. John Vick

Mailing Address 7301 Lava Rock Cir

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Manassas | VA | 20111 |

Purpose of Disbursement
Employee reimbursement - see memo items

Candidate Name

| | |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |
| State: | District: |

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08 | / | 15 | / | 2016 |

Transaction ID : SB30B.311447

Amount of Each Disbursement this Period

| |
|--------|
| 894.34 |
|--------|

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

| |
|---------|
| 2474.52 |
|---------|

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| |
|--|

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 77 OF 97

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial)

A. John Vick

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Mailing Address 7301 Lava Rock Cir

Transaction ID : SB30B.311447.0

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Manassas | VA | 20111 |

Amount of Each Disbursement this Period

Purpose of Disbursement
Employee mileage, cell, health ins reimburse

001

689.81

Candidate Name

Category/
Type☒ Memo Item

| | | | |
|----------------|---|-------------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
|----------------|---|-------------------|---|

State: District:

Full Name (Last, First, Middle Initial)

B. Famous Daves - Fredericksburg

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | | 15 | | 2016 |

Mailing Address 10101 Jefferson Davis Highway

Transaction ID : SB30B.311447.1

| | | |
|----------------|-------|----------|
| City | State | Zip Code |
| Fredericksburg | VA | 22407 |

Amount of Each Disbursement this Period

Purpose of Disbursement
Food for Convention watch party

001

204.53

Candidate Name

Category/
Type☒ Memo Item

| | | | |
|----------------|---|-------------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
|----------------|---|-------------------|---|

State: District:

Full Name (Last, First, Middle Initial)

C. John Vick

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | | 31 | | 2016 |

Mailing Address 7301 Lava Rock Cir

Transaction ID : SB30B.311513

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Manassas | VA | 20111 |

Amount of Each Disbursement this Period

Purpose of Disbursement
Salary

001

1330.17

Candidate Name

Category/
Type☐ Memo Item

| | | | |
|----------------|---|-------------------|---|
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
|----------------|---|-------------------|---|

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1330.17

164387.66

SCHEDULE H2 (FEC Form 3X)**ALLOCATION RATIOS**

PAGE 79 OF 97

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF VIRGINIA INC

**RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT
ACTIVITIES APPEARING ON THIS REPORT.**

Methods of allocation:

- I. FUNDRAISING activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity. **For PACs Only:** Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

| | | |
|--|---|--|
| <p>ACTIVITY OR EVENT IDENTIFIER 2015 Annual Advance (12/11/2015)</p> <p>ACTIVITY IS: <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input checked="" type="checkbox"/> Same as Previously Reported</p> <p style="text-align: center;">Transaction ID : H2.311380</p> | <p>FEDERAL %</p> <p style="text-align: center;">52.90 %</p> | <p>NONFEDERAL %</p> <p style="text-align: center;">47.10 %</p> |
| <p>ACTIVITY OR EVENT IDENTIFIER</p> <p>ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported</p> | <p>FEDERAL %</p> <p style="text-align: center;">%</p> | <p>NONFEDERAL %</p> <p style="text-align: center;">%</p> |
| <p>ACTIVITY OR EVENT IDENTIFIER</p> <p>ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported</p> | <p>FEDERAL %</p> <p style="text-align: center;">%</p> | <p>NONFEDERAL %</p> <p style="text-align: center;">%</p> |
| <p>ACTIVITY OR EVENT IDENTIFIER</p> <p>ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported</p> | <p>FEDERAL %</p> <p style="text-align: center;">%</p> | <p>NONFEDERAL %</p> <p style="text-align: center;">%</p> |
| <p>ACTIVITY OR EVENT IDENTIFIER</p> <p>ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported</p> | <p>FEDERAL %</p> <p style="text-align: center;">%</p> | <p>NONFEDERAL %</p> <p style="text-align: center;">%</p> |
| <p>ACTIVITY OR EVENT IDENTIFIER</p> <p>ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported</p> | <p>FEDERAL %</p> <p style="text-align: center;">%</p> | <p>NONFEDERAL %</p> <p style="text-align: center;">%</p> |

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 80 OF 97

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)
 REPUBLICAN PARTY OF VIRGINIA INC

NAME OF ACCOUNT
 Republican Party of Va Non Federal Acct

DATE OF RECEIPT

M M / D D / Y Y Y Y Y Y
 08 / 10 / 2016

TOTAL AMOUNT TRANSFERRED

6700.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

0.00

Transaction ID : H3.311381

ii) Generic Voter Drive

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a) 2015 Annual Advance (12/11/2015)

6700.00

Transaction ID : H3.311381.0

b)

c) Total Amount Transferred For Direct Fundraising

6700.00

v) Direct Candidate Support (List Activity or Event Identifier)

a)

b)

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC)

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred).....

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 81 OF 97

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)
 REPUBLICAN PARTY OF VIRGINIA INC

NAME OF ACCOUNT

Republican Party of Va Non Federal Acct

DATE OF RECEIPT

M M / D D / Y Y Y Y Y Y
 08 / 12 / 2016

TOTAL AMOUNT TRANSFERRED

2000.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

2000.00

Transaction ID : H3.311382

ii) Generic Voter Drive

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a)

b)

c) Total Amount Transferred For Direct Fundraising

v) Direct Candidate Support (List Activity or Event Identifier)

a)

b)

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC)

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred).....

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 82 OF 97

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)
 REPUBLICAN PARTY OF VIRGINIA INC

NAME OF ACCOUNT

Republican Party of Va Non Federal Acct

DATE OF RECEIPT

| | | | | |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 08 | / | 24 | / | 2016 |

TOTAL AMOUNT TRANSFERRED

3400.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

3400.00

Transaction ID : H3.311525

ii) Generic Voter Drive

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a)

b)

c) Total Amount Transferred For Direct Fundraising

v) Direct Candidate Support (List Activity or Event Identifier)

a)

b)

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC)

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred).....

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 83 OF 97

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF VIRGINIA INC

NAME OF ACCOUNT

Republican Party of Va Non Federal Acct

DATE OF RECEIPT

| | | | | |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 08 | / | 30 | / | 2016 |

TOTAL AMOUNT TRANSFERRED

9000.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

9000.00

Transaction ID : H3.311526

ii) Generic Voter Drive

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a)

b)

c) Total Amount Transferred For Direct Fundraising

v) Direct Candidate Support (List Activity or Event Identifier)

a)

b)

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC)

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

14400.00

TOTAL This Period (Generic Voter Drive)

0.00

TOTAL This Period (Exempt Activities)

0.00

TOTAL This Period (Direct Fundraising)

6700.00

TOTAL This Period (Direct Candidate Support)

0.00

TOTAL This Period (Public Communications Referring Only to Party)

0.00

TOTAL This Period (Total Amount Transferred).....

21100.00

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 84 OF 97

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

| | | | | |
|--|-------|---|--|--|
| A. Full Name (Last, First, Middle Initial) Transaction ID : H4.311344 <input type="checkbox"/> Memo Item Minds and Machines LLC | | | Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | |
| Mailing Address 3100 Donald Douglas Loop North | | | | |
| City | State | Zip Code | | |
| Santa Monica | CA | 90405 | | |
| Purpose of Disbursement: Purchase website domain names | | <div style="border: 1px solid black; padding: 2px;">001</div> Category/ Type | Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: right;">90309.48</div> | |
| Activity or Event Identifier: Administrative | | | Date <div style="border: 1px solid black; padding: 2px;">08</div> / <div style="border: 1px solid black; padding: 2px;">01</div> / <div style="border: 1px solid black; padding: 2px;">2016</div> | |
| FEDERAL SHARE | | + | NONFEDERAL SHARE | |
| 16.93 | | | 43.55 | |
| | | = | TOTAL AMOUNT | |
| | | | 60.48 | |

| | | | | |
|---|-------|---|--|--|
| B. Full Name (Last, First, Middle Initial) Transaction ID : H4.311345 <input type="checkbox"/> Memo Item Authorize.net | | | Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | |
| Mailing Address 808 E. Utah Valley Dr | | | | |
| City | State | Zip Code | | |
| American Fork | UT | 84003 | | |
| Purpose of Disbursement: Online credit card transaction fee | | <div style="border: 1px solid black; padding: 2px;">001</div> Category/ Type | Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: right;">90345.53</div> | |
| Activity or Event Identifier: Administrative | | | Date <div style="border: 1px solid black; padding: 2px;">08</div> / <div style="border: 1px solid black; padding: 2px;">02</div> / <div style="border: 1px solid black; padding: 2px;">2016</div> | |
| FEDERAL SHARE | | + | NONFEDERAL SHARE | |
| 10.09 | | | 25.96 | |
| | | = | TOTAL AMOUNT | |
| | | | 36.05 | |

| | | | | |
|--|-------|---|--|--|
| C. Full Name (Last, First, Middle Initial) Transaction ID : H4.311346 <input type="checkbox"/> Memo Item Elavon | | | Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | |
| Mailing Address 7300 Chapman Highway | | | | |
| City | State | Zip Code | | |
| Knoxville | TN | 37920 | | |
| Purpose of Disbursement: Credit card/merchant fee | | <div style="border: 1px solid black; padding: 2px;">001</div> Category/ Type | Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: right;">90653.30</div> | |
| Activity or Event Identifier: Administrative | | | Date <div style="border: 1px solid black; padding: 2px;">08</div> / <div style="border: 1px solid black; padding: 2px;">02</div> / <div style="border: 1px solid black; padding: 2px;">2016</div> | |
| FEDERAL SHARE | | + | NONFEDERAL SHARE | |
| 86.18 | | | 221.59 | |
| | | = | TOTAL AMOUNT | |
| | | | 307.77 | |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 113.20 | | 291.10 | | 404.30 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

| | | |
|---------------|------------------|--------------|
| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
| | | |

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 85 OF 97

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC**A. Full Name (Last, First, Middle Initial) Transaction ID : H4.311347**☐ Memo Item**City of Richmond**

Mailing Address P. O. Box 26060

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Richmond | VA | 23274 |

Purpose of Disbursement:
Office utilities

Activity or Event Identifier:

Administrative

001

Category/
Type

Allocated Activity or Event:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

90797.85

Date 08 / 02 / 2016

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

40.47

104.08

144.55

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.311348☐ Memo Item**Google, Inc**

Mailing Address 1600 Amphitheatre Pkwy

| | | |
|---------------|-------|----------|
| City | State | Zip Code |
| Mountain View | CA | 94043 |

Purpose of Disbursement:
Email service fee

Activity or Event Identifier:

Administrative

001

Category/
Type

Allocated Activity or Event:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

91122.85

Date 08 / 03 / 2016

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

91.00

234.00

325.00

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.311349☐ Memo Item**Arena Online**

Mailing Address 1780 Sequoia Vista Cir

| | | |
|----------------|-------|----------|
| City | State | Zip Code |
| Salt Lake City | UT | 84101 |

Purpose of Disbursement:
Email transmission service

Activity or Event Identifier:

Administrative

001

Category/
Type

Allocated Activity or Event:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

91582.85

Date 08 / 04 / 2016

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

128.80

331.20

460.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

260.27

669.28

929.55

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 86 OF 97

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

| | | | | |
|---|-------|--------------------------|---|--|
| A. Full Name (Last, First, Middle Initial) Transaction ID : H4.311350 <input type="checkbox"/> Memo Item | | | Allocated Activity or Event: | |
| Shred-It | | | <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| Mailing Address 2350 Aluminum Dr | | | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support | |
| City | State | Zip Code | <input type="checkbox"/> Public Comm (ref to party only) by PAC | |
| Hampton | VA | 23661 | | |
| Purpose of Disbursement: Office shredding service | | 001 Category/ Type | Allocated Activity or Event Year-To-Date | |
| Activity or Event Identifier: Administrative | | | 91625.92 | |
| Date | | M M / D D / Y Y Y Y Y Y | | |
| 08 | | 04 2016 | | |
| FEDERAL SHARE | | + | NONFEDERAL SHARE | |
| 12.06 | | | 31.01 | |
| | | = | TOTAL AMOUNT | |
| | | | 43.07 | |

| | | | | |
|---|-------|--------------------------|---|--|
| B. Full Name (Last, First, Middle Initial) Transaction ID : H4.311351 <input type="checkbox"/> Memo Item | | | Allocated Activity or Event: | |
| FedEx | | | <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| Mailing Address P. O. Box 1140 | | | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support | |
| City | State | Zip Code | <input type="checkbox"/> Public Comm (ref to party only) by PAC | |
| Memphis | TN | 38101 | | |
| Purpose of Disbursement: Shipping charge | | 001 Category/ Type | Allocated Activity or Event Year-To-Date | |
| Activity or Event Identifier: Administrative | | | 91660.74 | |
| Date | | M M / D D / Y Y Y Y Y Y | | |
| 08 | | 04 2016 | | |
| FEDERAL SHARE | | + | NONFEDERAL SHARE | |
| 9.75 | | | 25.07 | |
| | | = | TOTAL AMOUNT | |
| | | | 34.82 | |

| | | | | |
|---|-------|--------------------------|---|--|
| C. Full Name (Last, First, Middle Initial) Transaction ID : H4.311353 <input type="checkbox"/> Memo Item | | | Allocated Activity or Event: | |
| Minds and Machines LLC | | | <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| Mailing Address 3100 Donald Douglas Loop North | | | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support | |
| City | State | Zip Code | <input type="checkbox"/> Public Comm (ref to party only) by PAC | |
| Santa Monica | CA | 90405 | | |
| Purpose of Disbursement: Purchase website domain names | | 001 Category/ Type | Allocated Activity or Event Year-To-Date | |
| Activity or Event Identifier: Administrative | | | 91680.90 | |
| Date | | M M / D D / Y Y Y Y Y Y | | |
| 08 | | 04 2016 | | |
| FEDERAL SHARE | | + | NONFEDERAL SHARE | |
| 5.64 | | | 14.52 | |
| | | = | TOTAL AMOUNT | |
| | | | 20.16 | |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 27.45 | | 70.60 | | 98.05 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

| | | |
|---------------|------------------|--------------|
| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
| | | |

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 87 OF 97

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

| | | | | |
|---|-------|--------------------------|---|--|
| A. Full Name (Last, First, Middle Initial) Transaction ID : H4.311342 <input type="checkbox"/> Memo Item | | | Allocated Activity or Event: | |
| Postmaster | | | <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| Mailing Address 1801 Brook Road | | | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support | |
| City | State | Zip Code | <input type="checkbox"/> Public Comm (ref to party only) by PAC | |
| Richmond | VA | 23222 | | |
| Purpose of Disbursement: Postage stamps | | 001 Category/ Type | Allocated Activity or Event Year-To-Date | |
| Activity or Event Identifier: Administrative | | | 91689.90 | |
| Date | | M M / D D / Y Y Y Y Y Y | | |
| 08 | | 05 2016 | | |
| FEDERAL SHARE | | + | NONFEDERAL SHARE | |
| 2.52 | | | 6.48 | |
| | | = | TOTAL AMOUNT | |
| | | | 9.00 | |

| | | | | |
|---|-------|--------------------------|---|--|
| B. Full Name (Last, First, Middle Initial) Transaction ID : H4.311354 <input type="checkbox"/> Memo Item | | | Allocated Activity or Event: | |
| AT & T Mobility | | | <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| Mailing Address P. O. Box 536216 | | | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support | |
| City | State | Zip Code | <input type="checkbox"/> Public Comm (ref to party only) by PAC | |
| Atlanta | GA | 30353 | | |
| Purpose of Disbursement: Monthly cell phone service | | 001 Category/ Type | Allocated Activity or Event Year-To-Date | |
| Activity or Event Identifier: Administrative | | | 91806.76 | |
| Date | | M M / D D / Y Y Y Y Y Y | | |
| 08 | | 08 2016 | | |
| FEDERAL SHARE | | + | NONFEDERAL SHARE | |
| 32.72 | | | 84.14 | |
| | | = | TOTAL AMOUNT | |
| | | | 116.86 | |

| | | | | |
|---|-------|--------------------------|---|--|
| C. Full Name (Last, First, Middle Initial) Transaction ID : H4.311355 <input type="checkbox"/> Memo Item | | | Allocated Activity or Event: | |
| Postmaster | | | <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| Mailing Address 1801 Brook Road | | | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support | |
| City | State | Zip Code | <input type="checkbox"/> Public Comm (ref to party only) by PAC | |
| Richmond | VA | 23222 | | |
| Purpose of Disbursement: Postage expense | | 001 Category/ Type | Allocated Activity or Event Year-To-Date | |
| Activity or Event Identifier: Administrative | | | 91867.96 | |
| Date | | M M / D D / Y Y Y Y Y Y | | |
| 08 | | 08 2016 | | |
| FEDERAL SHARE | | + | NONFEDERAL SHARE | |
| 17.14 | | | 44.06 | |
| | | = | TOTAL AMOUNT | |
| | | | 61.20 | |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 52.38 | | 134.68 | | 187.06 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

| | | |
|---------------|------------------|--------------|
| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
| | | |

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 88 OF 97

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC**A. Full Name (Last, First, Middle Initial) Transaction ID : H4.311356**☐ Memo Item**Dominion Virginia Power**

Mailing Address P. O. Box 26543

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Richmond | VA | 23290 |

Purpose of Disbursement:
Office electric utilities

Activity or Event Identifier:

Administrative

001

Category/
Type

Allocated Activity or Event:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

92607.02

Date

MM / DD / YYYY
08 / 08 / 2016

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

206.94

532.12

739.06

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.311357☐ Memo Item**Supply Room Companies**Mailing Address 14140 Washington Hwy
P. O. Box 1810

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Ashland | VA | 23005 |

Purpose of Disbursement:
Office supplies

Activity or Event Identifier:

Administrative

001

Category/
Type

Allocated Activity or Event:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

92635.45

Date

MM / DD / YYYY
08 / 08 / 2016

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

7.96

20.47

28.43

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.311358☐ Memo Item**Verizon**

Mailing Address P. O. Box 17398

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Baltimore | MD | 21297 |

Purpose of Disbursement:
Office phone service

Activity or Event Identifier:

Administrative

001

Category/
Type

Allocated Activity or Event:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

93215.10

Date

MM / DD / YYYY
08 / 08 / 2016

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

162.30

417.35

579.65

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

377.20

969.94

1347.14

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 89 OF 97

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

| | | | |
|---|--|--|--|
| A. Full Name (Last, First, Middle Initial) Transaction ID : H4.311359 <input type="checkbox"/> Memo Item Canaan Printing Inc Mailing Address 4820 Jefferson Davis Hgwy City Richmond State VA Zip Code 23234 Purpose of Disbursement: Office printing expense Activity or Event Identifier: Administrative Category/Type 001 | | | Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 93304.08 Date 08 / 10 / 2016 |
| FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 24.91 + 64.07 = 88.98 | | | |

| | | | |
|--|--|--|--|
| B. Full Name (Last, First, Middle Initial) Transaction ID : H4.311361 <input type="checkbox"/> Memo Item Amazon Super Store Mailing Address 1850 Mercer Rd City Lexington State KY Zip Code 40511 Purpose of Disbursement: Purchase printer Activity or Event Identifier: Administrative Category/Type 001 | | | Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 93448.00 Date 08 / 11 / 2016 |
| FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 40.30 + 103.62 = 143.92 | | | |

| | | | |
|--|--|--|--|
| C. Full Name (Last, First, Middle Initial) Transaction ID : H4.311362 <input type="checkbox"/> Memo Item Quickbooks Payroll Service Mailing Address P. O. Box 6170 City Fredericksburg State VA Zip Code 22403 Purpose of Disbursement: Payroll service fee Activity or Event Identifier: Administrative Category/Type 001 | | | Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 93638.25 Date 08 / 12 / 2016 |
| FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 53.27 + 136.98 = 190.25 | | | |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 118.48 | | 304.67 | | 423.15 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

| | | |
|---------------|------------------|--------------|
| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
| | | |

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

| | | | |
|-------------------------|----|----|----|
| PAGE | 90 | OF | 97 |
| FOR LINE 21a OF FORM 3X | | | |

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

| | | | |
|--|--|--|---|
| A. Full Name (Last, First, Middle Initial) Transaction ID : H4.311363 <input type="checkbox"/> Memo Item Sam's Club Discover Mailing Address P. O. Box 960016 City Orlando State FL Zip Code 32896 Purpose of Disbursement: Credit card payment - see memo item Activity or Event Identifier: Administrative | | | <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 93753.25 Date 08 / 12 / 2016 |
| FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 32.20 + 82.80 = 115.00 | | | |

| | | | |
|--|--|--|---|
| B. Full Name (Last, First, Middle Initial) Transaction ID : H4.311364 <input checked="" type="checkbox"/> Memo Item Constant Contact Mailing Address 1601 Trapelo Rd City Waltham State MA Zip Code 02451 Purpose of Disbursement: Email service fee Activity or Event Identifier: Administrative | | | <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 0.00 Date 08 / 12 / 2016 |
| FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 32.20 + 82.80 = 115.00 | | | |

| | | | |
|--|--|--|---|
| C. Full Name (Last, First, Middle Initial) Transaction ID : H4.311343 <input type="checkbox"/> Memo Item Martin's Food Market Mailing Address 10150 Brook Rd City Glen Allen State VA Zip Code 23059 Purpose of Disbursement: Office food supplies Activity or Event Identifier: Administrative | | | <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 93769.89 Date 08 / 15 / 2016 |
| FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 4.66 + 11.98 = 16.64 | | | |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---------------|---|------------------|---|--------------|
| 36.86 | | 94.78 | | 131.64 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
|---------------|------------------|--------------|
| | | |

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

| |
|-------------------------|
| PAGE 91 OF 97 |
| FOR LINE 21a OF FORM 3X |

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

| | | | | |
|---|-------|-------------------|---|--|
| A. Full Name (Last, First, Middle Initial) Transaction ID : H4.311365 <input type="checkbox"/> Memo Item | | | Allocated Activity or Event: | |
| gotomypc.com | | | <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| Mailing Address Main street | | | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support | |
| City | State | Zip Code | <input type="checkbox"/> Public Comm (ref to party only) by PAC | |
| San Diego | CA | 92169 | | |
| Purpose of Disbursement: Internet connection fee | | 001 | Allocated Activity or Event Year-To-Date | |
| Activity or Event Identifier: Administrative | | | 93793.84 | |
| | | Category/ Type | Date | |
| | | | MM / DD / YYYY 08 / 15 / 2016 | |
| FEDERAL SHARE | | + | NONFEDERAL SHARE | |
| 6.71 | | | 17.24 | |
| | | = | TOTAL AMOUNT | |
| | | | 23.95 | |

| | | | | |
|---|-------|-------------------|---|--|
| B. Full Name (Last, First, Middle Initial) Transaction ID : H4.311366 <input type="checkbox"/> Memo Item | | | Allocated Activity or Event: | |
| Comcast | | | <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| Mailing Address 918 N. Boulevard | | | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support | |
| City | State | Zip Code | <input type="checkbox"/> Public Comm (ref to party only) by PAC | |
| Richmond | VA | 23220 | | |
| Purpose of Disbursement: Office internet service | | 001 | Allocated Activity or Event Year-To-Date | |
| Activity or Event Identifier: Administrative | | | 94075.45 | |
| | | Category/ Type | Date | |
| | | | MM / DD / YYYY 08 / 15 / 2016 | |
| FEDERAL SHARE | | + | NONFEDERAL SHARE | |
| 78.85 | | | 202.76 | |
| | | = | TOTAL AMOUNT | |
| | | | 281.61 | |

| | | | | |
|---|-------|-------------------|---|--|
| C. Full Name (Last, First, Middle Initial) Transaction ID : H4.311367 <input type="checkbox"/> Memo Item | | | Allocated Activity or Event: | |
| FedEx | | | <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| Mailing Address P. O. Box 1140 | | | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support | |
| City | State | Zip Code | <input type="checkbox"/> Public Comm (ref to party only) by PAC | |
| Memphis | TN | 38101 | | |
| Purpose of Disbursement: Shipping charge | | 001 | Allocated Activity or Event Year-To-Date | |
| Activity or Event Identifier: Administrative | | | 94242.85 | |
| | | Category/ Type | Date | |
| | | | MM / DD / YYYY 08 / 18 / 2016 | |
| FEDERAL SHARE | | + | NONFEDERAL SHARE | |
| 46.87 | | | 120.53 | |
| | | = | TOTAL AMOUNT | |
| | | | 167.40 | |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 132.43 | | 340.53 | | 472.96 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

| | | |
|---------------|------------------|--------------|
| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
| | | |

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 92 OF 97

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

| | | | |
|--|--|--|--|
| A. Full Name (Last, First, Middle Initial) Transaction ID : H4.311368 <input type="checkbox"/> Memo Item Premium Assignment Corporation Mailing Address P.O. Box 8000 City Tallahassee State FL Zip Code 32314 Purpose of Disbursement: D & O Liability ins premium Activity or Event Identifier: Administrative Category/Type 001 | | | Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 95227.80 Date 08 / 22 / 2016 |
| FEDERAL SHARE 275.79 + NONFEDERAL SHARE 709.16 = TOTAL AMOUNT 984.95 | | | |

| | | | |
|---|--|--|--|
| B. Full Name (Last, First, Middle Initial) Transaction ID : H4.311527 <input type="checkbox"/> Memo Item Canon Financial Services Mailing Address 14904 Collections Center Dr City Chicago State IL Zip Code 60693 Purpose of Disbursement: Copier equipment lease payment Activity or Event Identifier: Administrative Category/Type 001 | | | Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 95949.11 Date 08 / 23 / 2016 |
| FEDERAL SHARE 201.97 + NONFEDERAL SHARE 519.34 = TOTAL AMOUNT 721.31 | | | |

| | | | |
|--|--|--|--|
| C. Full Name (Last, First, Middle Initial) Transaction ID : H4.311530 <input type="checkbox"/> Memo Item Advantage, Inc Mailing Address 2300 Clarendon Ave Suite 1004 City Arlington State VA Zip Code 22201 Purpose of Disbursement: Mobile data app Activity or Event Identifier: Administrative Category/Type 001 | | | Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 97949.11 Date 08 / 23 / 2016 |
| FEDERAL SHARE 560.00 + NONFEDERAL SHARE 1440.00 = TOTAL AMOUNT 2000.00 | | | |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|----------------|---|------------------|---|----------------|
| 1037.76 | | 2668.50 | | 3706.26 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
|---------------|------------------|--------------|
| | | |

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 93 OF 97

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

| | | | | |
|---|-------|--------------------------|---|--|
| A. Full Name (Last, First, Middle Initial) Transaction ID : H4.311531 <input type="checkbox"/> Memo Item | | | Allocated Activity or Event: | |
| Rackspace Cloud | | | <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| Mailing Address P. O. Box 730759 | | | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support | |
| City | State | Zip Code | <input type="checkbox"/> Public Comm (ref to party only) by PAC | |
| Dallas | TX | 75373 | | |
| Purpose of Disbursement: Website server storage fee | | 001 Category/ Type | Allocated Activity or Event Year-To-Date | |
| Activity or Event Identifier: Administrative | | | 98162.07 | |
| Date | | M M / D D / Y Y Y Y Y Y | | |
| 08 | | 26 2016 | | |
| FEDERAL SHARE | | + | NONFEDERAL SHARE | |
| 59.63 | | | 153.33 | |
| | | = | TOTAL AMOUNT | |
| | | | 212.96 | |

| | | | | |
|---|-------|--------------------------|---|--|
| B. Full Name (Last, First, Middle Initial) Transaction ID : H4.311532 <input type="checkbox"/> Memo Item | | | Allocated Activity or Event: | |
| Aramark | | | <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| Mailing Address 403 North Third Street | | | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support | |
| City | State | Zip Code | <input type="checkbox"/> Public Comm (ref to party only) by PAC | |
| Richmond | VA | 23219-1705 | | |
| Purpose of Disbursement: Catering for State Central meeting | | 001 Category/ Type | Allocated Activity or Event Year-To-Date | |
| Activity or Event Identifier: Administrative | | | 98738.45 | |
| Date | | M M / D D / Y Y Y Y Y Y | | |
| 08 | | 26 2016 | | |
| FEDERAL SHARE | | + | NONFEDERAL SHARE | |
| 161.39 | | | 414.99 | |
| | | = | TOTAL AMOUNT | |
| | | | 576.38 | |

| | | | | |
|---|-------|--------------------------|---|--|
| C. Full Name (Last, First, Middle Initial) Transaction ID : H4.311521 <input type="checkbox"/> Memo Item | | | Allocated Activity or Event: | |
| City of Richmond | | | <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| Mailing Address P. O. Box 26060 | | | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support | |
| City | State | Zip Code | <input type="checkbox"/> Public Comm (ref to party only) by PAC | |
| Richmond | VA | 23274 | | |
| Purpose of Disbursement: Office utilities | | 001 Category/ Type | Allocated Activity or Event Year-To-Date | |
| Activity or Event Identifier: Administrative | | | 98883.00 | |
| Date | | M M / D D / Y Y Y Y Y Y | | |
| 08 | | 29 2016 | | |
| FEDERAL SHARE | | + | NONFEDERAL SHARE | |
| 40.47 | | | 104.08 | |
| | | = | TOTAL AMOUNT | |
| | | | 144.55 | |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 261.49 | | 672.40 | | 933.89 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

| | | |
|---------------|------------------|--------------|
| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
| | | |

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 94 OF 97

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC**A. Full Name (Last, First, Middle Initial) Transaction ID : H4.311522**☐ Memo Item**Hanover Insurance Co.**

Mailing Address P. O. Box 580045

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Charlotte | NC | 28258 |

Purpose of Disbursement:
Property, Liability & Worker comp ins premium

Activity or Event Identifier:

Administrative

001

Category/
Type

Allocated Activity or Event:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

99795.74

Date 08 / 29 / 2016

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

255.57

657.17

912.74

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.311523☐ Memo Item**Kohlmanns Grocery**

Mailing Address 109 E. Grace St

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Richmond | VA | 23219 |

Purpose of Disbursement:
Office food supplies

Activity or Event Identifier:

Administrative

001

Category/
Type

Allocated Activity or Event:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

99799.99

Date 08 / 29 / 2016

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

1.19

3.06

4.25

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.311534☐ Memo Item**Chain Bridge Bank**

Mailing Address 1445-A Laughlin Ave

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| McLean | VA | 22101 |

Purpose of Disbursement:
Bank service fee

Activity or Event Identifier:

Administrative

001

Category/
Type

Allocated Activity or Event:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

99819.99

Date 08 / 29 / 2016

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

5.60

14.40

20.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

262.36

674.63

936.99

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 95 OF 97

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC**A. Full Name (Last, First, Middle Initial) Transaction ID : H4.311538**☐ Memo Item**Canva for Non-Profits**

Mailing Address 260 Homer St

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Palo Alto | CA | 94301 |

Purpose of Disbursement:
Advertising design

Activity or Event Identifier:

Administrative

001

Category/
Type

Allocated Activity or Event:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

99832.94

Date

MM / DD / YYYY
08 / 29 / 2016

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

3.63

9.32

12.95

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.311520☐ Memo Item**Quickbooks Payroll Service**

Mailing Address P. O. Box 6170

| | | |
|----------------|-------|----------|
| City | State | Zip Code |
| Fredericksburg | VA | 22403 |

Purpose of Disbursement:
Payroll service fee

Activity or Event Identifier:

Administrative

001

Category/
Type

Allocated Activity or Event:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

99920.69

Date

MM / DD / YYYY
08 / 30 / 2016

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

24.57

63.18

87.75

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.311539☐ Memo Item**Daniel J Dodds**

Mailing Address 15376 Wetherburn Ct

| | | |
|-------------|-------|----------|
| City | State | Zip Code |
| Centreville | VA | 20120 |

Purpose of Disbursement:
Employee reimbursement - see memo items

Activity or Event Identifier:

Administrative

002

Category/
Type

Allocated Activity or Event:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

101440.73

Date

MM / DD / YYYY
08 / 30 / 2016

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

425.61

1094.43

1520.04

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

453.81

1166.93

1620.74

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

| |
|-------------------------|
| PAGE 96 OF 97 |
| FOR LINE 21a OF FORM 3X |

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC

| | | | | | | | | | | | | |
|--|---|------------------|---|--------------|------------------|---|--------------|-------|--|--------|--|--------|
| A. Full Name (Last, First, Middle Initial) Transaction ID : H4.311540 <input checked="" type="checkbox"/> Memo Item Daniel J Dodds Mailing Address 15376 Wetherburn Ct City Centreville State VA Zip Code 20120 Purpose of Disbursement: Employee mileage reimbursement-National Convention Activity or Event Identifier: Administrative | | | Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 0.00 Date 08 / 30 / 2016 | | | | | | | | | |
| <table border="0"> <tr> <td>FEDERAL SHARE</td> <td>+</td> <td>NONFEDERAL SHARE</td> <td>=</td> <td>TOTAL AMOUNT</td> </tr> <tr> <td>66.28</td> <td></td> <td>170.45</td> <td></td> <td>236.73</td> </tr> </table> | | | FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT | 66.28 | | 170.45 | | 236.73 |
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT | | | | | | | | |
| 66.28 | | 170.45 | | 236.73 | | | | | | | | |

| | | | | | | | | | | | | |
|--|---|------------------|---|--------------|------------------|---|--------------|--------|--|--------|--|---------|
| B. Full Name (Last, First, Middle Initial) Transaction ID : H4.311541 <input checked="" type="checkbox"/> Memo Item Holiday Inn Strongsville Mailing Address 15471 Royalton Rd City Strongsville State OH Zip Code 44136 Purpose of Disbursement: Lodging expense at National Convention Activity or Event Identifier: Administrative | | | Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 0.00 Date 08 / 30 / 2016 | | | | | | | | | |
| <table border="0"> <tr> <td>FEDERAL SHARE</td> <td>+</td> <td>NONFEDERAL SHARE</td> <td>=</td> <td>TOTAL AMOUNT</td> </tr> <tr> <td>359.33</td> <td></td> <td>923.98</td> <td></td> <td>1283.31</td> </tr> </table> | | | FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT | 359.33 | | 923.98 | | 1283.31 |
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT | | | | | | | | |
| 359.33 | | 923.98 | | 1283.31 | | | | | | | | |

| | | | | | | | | | | | | |
|--|---|------------------|--|--------------|------------------|---|--------------|-------|--|-------|--|-------|
| C. Full Name (Last, First, Middle Initial) Transaction ID : H4.311533 <input type="checkbox"/> Memo Item Chain Bridge Bank Mailing Address 1445-A Laughlin Ave City McLean State VA Zip Code 22101 Purpose of Disbursement: Monthly checking account fee Activity or Event Identifier: Administrative | | | Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 101490.73 Date 08 / 31 / 2016 | | | | | | | | | |
| <table border="0"> <tr> <td>FEDERAL SHARE</td> <td>+</td> <td>NONFEDERAL SHARE</td> <td>=</td> <td>TOTAL AMOUNT</td> </tr> <tr> <td>14.00</td> <td></td> <td>36.00</td> <td></td> <td>50.00</td> </tr> </table> | | | FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT | 14.00 | | 36.00 | | 50.00 |
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT | | | | | | | | |
| 14.00 | | 36.00 | | 50.00 | | | | | | | | |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 14.00 | | 36.00 | | 50.00 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

| | | |
|---------------|------------------|--------------|
| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
| | | |

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 97 OF 97

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF VIRGINIA INC**A. Full Name (Last, First, Middle Initial) Transaction ID : H4.311537**☐ Memo Item**Wells Fargo Bank**

Mailing Address 1021 E. Cary St.

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Richmond | VA | 23219 |

Purpose of Disbursement:
Monthly checking account fee

Activity or Event Identifier:

Administrative

001

Category/
Type

Allocated Activity or Event:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

101504.73

Date

MM / DD / YYYY
08 / 31 / 2016

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

3.92

10.08

14.00

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.311554☐ Memo Item**American Express**

Mailing Address P O Box 53852

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Phoenix | AZ | 85072 |

Purpose of Disbursement:
Credit card/merchant fee

Activity or Event Identifier:

Administrative

001

Category/
Type

Allocated Activity or Event:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

101526.31

Date

MM / DD / YYYY
08 / 31 / 2016

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

6.04

15.54

21.58

C. Full Name (Last, First, Middle Initial)☐ Memo Item

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

Purpose of Disbursement:

Activity or Event Identifier:

Category/
Type

Allocated Activity or Event:

☐ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

MM / DD / YYYY

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

9.96

25.62

35.58

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

3157.65

8119.66

11277.31